

# START

0016299

AMENDMENTS FOR THE NRDWL  
MANIFEST RECORDS FOR YEAR  
1984

**BEST AVAILABLE COPY**



AMENDMENT PAGES FOR THE NONRADIOACTIVE DANGEROUS WASTE LANDFILL  
FOR YEAR 1984

1. These pages consist of the NRDWL internal shipping documents that were stored at the NRDWL caretaker trailer and the Seattle records center. The trailer is located at the Solid Waste Landfill, south and adjacent of the NRDWL.
2. These pages are duplicates of those stored at the NRDWL operations facility.
3. Insert these pages at the back of the binder of the initial submittal "Manifest Records Nonradioactive Dangerous Waste Landfill for year 1984", on February 14, 1991.

2000-10-27 11:16



**ROCKWELL HANFORD OPERATIONS  
CHEMICAL WASTE DISPOSAL REQUEST**

Logbook # 11-33

**Manifest(s) cross-reference**

END

**Telephone number**

**Address**

Company

RD Hensley

6-3743

4831/400Area

WtC

nature: K. Henschel

Date 9/20/84

STE DESCRIPTION (if more than 12 items, continue on the back of this form)

[illegible]

**radiation Monitoring Release Survey Card Number (if applicable)**

### \*Hazards

**Corrosive-C**

Oxidizer-0

## Poison-P

**Flammable-F**

### Explosive-E

**\*\*Status**

Full-F

New (unused)- N

Partially Full-PF

Empty (1 in.) - M.T.

Triple rinsed (empty drums)-TR

Reacted-Rx

U-1041 (rev)

DISPOSAL ANALYSIS NO. 11-33

ITEM NO.	CONTAINER NO.	DOT SHIPPING NAME	DOT HAZARD CLASS	DOT IDENTIFICATION NUMBER	DOT LABEL	EPA NUMBER	NO. OF CONTAINERS	TYPE OF CONTAINER	QUANTITY PER CONTAINER
-------------	------------------	-------------------------	------------------------	---------------------------------	--------------	---------------	----------------------	----------------------	------------------------------

OFFSITE DISPOSALONSITE DISPOSAL

1		Oil, NOS	Combustible Liquid	NA1270	None	None	40	55-gal. drums	Empty
---	--	----------	-----------------------	--------	------	------	----	---------------	-------

0000342

OUTGOING LTR. NO.

R84-2936

INCOMING LTR. NO.

ACTION

REPLY DUE

DIST:

LTR.  
ENCL.  
APPR.

Ash, E.B.

Bartholomew, D.C.

Bellofatto, M.

Carey, J.M.

Crowford, A.C.

Deichman, J.L.

Di Pol, C.V.

Denshue, J.W.

Gimera, R.J.

Gruhn, R.S.

Hammond, R.D.

Heineman, R.E.

Kinzer, J.E.

Knight, B.E.

Larsen, M.P.

Lorenzini, P.C.

Matlock, R.G.

McDermott, R.J.

Oglethorpe, L.R.

Pascoe, K.J.

Patterson, J.W.

Perkins, J.O.

Reese, A.L.

Roscher, J.H.

Selina, C.M.

Wool, V.R.

Zahn, L.L.

Contract Administrator

Control Files

DA

DA

DA

DA

DA

DA

DA

DA

DA

DA

DA

DA

DA

DA

DA

DA

DA

DA

DA

DA

DA

DA

DA

DA

DA

DA

Rockwell Hanford Operations  
Energy Systems Group  
P.O. Box 800  
Richland, WA 99352



Rockwell  
International

*HAS BEEN COMPLETED  
IN CHEMICAL TRENCH  
9-24-1984*

SEP 05 1984

In reply, refer to letter R84-2936

Ms. Cynthia Veneziano  
Environmental Health Sciences  
Hanford Environmental Health  
Foundation  
Post Office Box 100  
Richland, Washington 99352

Dear Ms. Veneziano:

DISPOSAL REQUEST 10-43

Reference: Application to Dispose of Nonradioactive Hazardous Waste,  
C. D. Veneziano, July 31, 1984

Rockwell Hanford Operations (Rockwell) has completed review of  
referenced Disposal Request 10-43. The disposal method for these  
wastes is outlined on the attached "Disposal Analysis 10-43."

All packaging, labeling, and marking of the waste reagents shall be  
completed in accordance with the prescribed instructions which are  
based on Department of Transportation (DOT) Regulations 49 CFR 171-179.  
It has been determined that this is a non-regulated waste, which does  
not require a Hazardous Waste Manifest.

Arrangements for transporting waste materials directly to the Hanford  
Nonradioactive Hazardous Waste Disposal Trench is a generator  
responsibility and may be implemented following compliance with  
Disposal Analysis 10-43 instructions.

Inspections by Rockwell of package content and integrity will be made  
as required to certify that the waste is prepared in the manner  
designated on Disposal Analysis 10-43. Failure to package in the  
manner described on Disposal Analysis 10-43 will result in suspension  
of disposal privileges for the offending facility.

000343

DATE  
SEP 05 1984

54 6000 117



Rockwell  
International

Ms. Cynthia Veneziano

Page 2

SEP 05 1984

Should you require further assistance regarding the disposition of wastes listed on Disposal Analysis 10-43, please contact me on 3-4106.

Very truly yours,

*L. F. Lust*

L. F. Lust  
Solid Waste Processing & Disposal Unit

LFL:ra

Att.

cc: D. R. Groth  
A. D. Poor

000344

# REQUEST FOR DISPOSAL OF NONRADIOACTIVE HAZARDOUS MATERIAL

30 Nov 82

## INSTRUCTIONS

Complete this request by providing all available information in the spaces provided. Fold, staple, and return completed form by plant mail to Environmental Protection.

### I. CUSTODIAN

NAME Jeene M Hobbs

TELEPHONE 376-1631

BUILDING/AREA 3762/300 Area

### II. IDENTIFICATION OF MATERIAL

TRADE NAME Acid mixture - Picronic Acid, 1/2 M; Formic Acid, 1/2 M; <sup>reagent for alk. Id.</sup>

CHEMICAL NAME Vanadous formate, 0.1 M. 20 gal liquid in 55 gal drum <sup>no info</sup>

STORAGE LOCATION 377 bldg/ 300 Area

CONTAMINATED WITH RADIOACTIVE MATERIAL? YES      NO xx

### III. PACKAGING

LIQUID xx SOLID      GAS     

NUMBER OF CONTAINERS 1 WEIGHT 200 EA. VOLUME 55 gal EA.

TYPE OF CONTAINER 55 gal drum DOT-17H AGE OF CONTAINER 1st USE

### IV. REASON FOR DISPOSAL

Chemicals no <sup>longer</sup> needed for the operation.

### V. DATE DISPOSAL REQUIRED

January 1, 1983

### VI. COMMENTS

The mixture is a liquid as it stands. It can be absorbed in the drum at your request. Yes it must be absorbed prior to disposal

APPROVED FOR DISPOSAL

BY Sam R. Cox

DATE December 13 1982

DISPOSAL LOCATION Landfill Corrosive

BY Q & Phelps 5 - 23 1982 Trench

000325

# HAZARDOUS WASTE MANIFEST

## THIS SHIPPING ORDER

must be legibly filled in, in ink, in indelible pencil, or in Carbon, and retained by the Agent.

MANIFEST DOCUMENT NUMBER

This document refers to  
disposal request  
#PNL-82-016.

PNL-84-001-M

TO: T/S/D FACILITY <u>Rockwell Hanford Operations</u>	FROM: Generator <u>Battelle-PNL</u>
E.P.A. ID Code No. <u>WA-89-000-8967</u>	E.P.A. ID Code No. <u>WA-89-000-8967</u>
Address <u>Richland, WA 99382</u>	Address <u>Richland, WA 99352</u>
Destination <u>Cenral Landfill - chemical trench</u>	Origin <u>377 Bldg/300 Area</u>
Phone <u>Harlan Boynton 373-3516</u>	Phone <u>Jeene Hobbs 376-1631</u>

No. Shipping Units	D.O.T. PROPER SHIPPING NAME	HAZARD CLASS	Haz. Mat. I.D. No.	EPA Haz. Waste No.	WEIGHT	LABELS REQUIRED (or Exemption No.)
1	Waste corrosive liquid, n.o.s. (picrolonic acid, formic acid, & vanadous formate) (the liquid has been absorbed.)	corrosive material	1 UN1760	D002	250	hazardous waste & corrosive

### PLACARDS REQUIRED none

NOTE - Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property. The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding \$ \_\_\_\_\_ Per \_\_\_\_\_

Subject to Section 7 of the conditions, if this shipment is to be delivered to the consignee without recourse on the consignor, the consignor shall sign the following statement:  
The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.

(Signature of Consignor)

### FREIGHT CHARGES

PREPAID ☐ COLLECT ☐

RECEIVED, subject to the classifications and tariffs in effect on the date of the issue of this Bill of Lading, the property described above in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, consigned, and destined as indicated above which said carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed as to each carrier of all or any of, said property over all or any portion of said route to destination and as to each party at any time interested in all or any said property, that every service to be performed hereunder shall be subject to all the bills of lading terms and conditions in the governing classification on the date of shipment. Shipper hereby certifies that he is familiar with all the bill of lading terms and conditions in the governing classification and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

### ALTERNATE DESTINATION (EMERGENCY ONLY)

T/S/D FACILITY none  
E.P.A. ID Code No. \_\_\_\_\_  
Address \_\_\_\_\_  
Destination \_\_\_\_\_

### EMERGENCY RESPONSE INFORMATION

CONTACT Name Jeene Hobbs  
Phone 376-1631  
National Response Center 1-800-424-8802  
in D. C. 426-2675

### CERTIFICATION

This is to certify that the above named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the E.P.A.

Generator Signature Jeene Hobbs Jeene M Hobbs Date 14 May 84

TRANSPORTER #1 John W. Carr E.P.A. ID No. \_\_\_\_\_  
Address Rt 3 Box 3317 #1  
City Kennecott State AK Zip 99852 Phone 532-3076

Transporter No. 1 Signature John W. Carr This is to certify acceptance of the hazardous waste shipment. Date 5/23/84

TRANSPORTER #2 \_\_\_\_\_ E.P.A. ID No. \_\_\_\_\_  
Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Phone \_\_\_\_\_

Transporter No. 2 Signature \_\_\_\_\_ This is to certify acceptance of the hazardous waste shipment. Date 5-23-1984

### TREATMENT/STORAGE/DISPOSAL FACILITY

T/S/D FACILITY Signature D E Fisher This is to certify acceptance of the hazardous waste for treatment, storage, or disposal. Date 5-23-1984

TRANSPORTER #1 CDV 000346 17-BLSC (6-PLY)



# HAZARDOUS WASTE MANIFEST

## THIS SHIPPING ORDER

must be legibly filled in, in ink, in Indelible Pencil, or in Carbon, and retained by the Agent.

MANIFEST DOCUMENT NUMBER

PNL-M-83-003

This document refers to  
disposal request  
#PNL-84-017.

TO: T/S/D FACILITY Rockwell Hanford Operation	FROM: Generator Battelle - PNL
E.P.A. ID Code No. WA7-89-000-8967	E.P.A. ID Code No. WA7-89-000-8967
Address Richland, WA	Address Richland, WA
Destination Central Landfill-chemical trench	Origin 306W/300 Area
Phone Hanan Bowman 373-3516	Phone Jeene Hobbs 376-1631

No Shipping Units	D.O.T. PROPER SHIPPING NAME	HAZARD CLASS	Haz Mat I.D. No.	EPA Haz Waste No.	WEIGHT	LABELS REQUIRED (or Exemption No.)
1	Waste Metal alloy 40% aluminum & 60% Calcium	Water Reactive solid	UN2813	D001	400#	Flammable solid & Dangerous when wet

### PLACARDS REQUIRED

NOTE - Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property. The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding \$ \_\_\_\_\_ Per \_\_\_\_\_

Subject to Section 7 of the conditions, if this shipment is to be delivered to the consignee without receipt on the consignee, the consignor shall sign the following statement:  
The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.  
(Signature of Consignor) \_\_\_\_\_

FREIGHT CHARGES  
PREPAID ☐ COLLECT ☐

RECEIVED, subject to the classifications and tariffs in effect on the date of the issue of this Bill of Lading, the property described above in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, consigned, and destined as indicated above which said carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed as to each carrier of all or any of said property over all or any portion of said route to destination and as to each party at any time interested in all or any said property, that every service to be performed hereunder shall be subject to all the bill of lading terms and conditions in the governing classification on the date of shipment. Shipper hereby certifies that he is familiar with all the bill of lading terms and conditions in the governing classification and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

ALTERNATE DESTINATION (EMERGENCY ONLY)	EMERGENCY RESPONSE INFORMATION
T/S/D FACILITY none	CONTACT Name J Single Point Contact
E.P.A. ID Code No.	Phone 375-2400
Address	National Response Center 1-800-424-8802
Destination	in D. C. 426-2675

### CERTIFICATION

This is to certify that the above named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the E.P.A.

Generator Signature Jeene Hobbs *Jeene M Hobbs* Date 9-5-84

TRANSPORTER #1 \_\_\_\_\_ E.P.A. ID No. \_\_\_\_\_  
Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Phone \_\_\_\_\_

Transporter No. 1 Signature \_\_\_\_\_ Date \_\_\_\_\_  
This is to certify acceptance of the hazardous waste shipment.

TRANSPORTER #2 \_\_\_\_\_ E.P.A. ID No. \_\_\_\_\_  
Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Phone \_\_\_\_\_

Transporter No. 2 Signature \_\_\_\_\_ Date \_\_\_\_\_  
This is to certify acceptance of the hazardous waste shipment.

TREATMENT/STORAGE/DISPOSAL FACILITY 000347  
T/S/D FACILITY Signature ID E Hobbs Date 9-5-1984  
This is to certify acceptance of the hazardous waste for treatment, storage, or disposal.

TRANSPORTER #1 CDV

17-BLS-6 (6-PLY)

# HAZARDOUS WASTE MANIFEST

## SHIPPING ORDER

must be legibly filled in, in ink, in indelible pencil, or in Carbon, and retained by the Agent.

MANIFEST DOCUMENT NUMBER

RHD-11-23

<b>TO:</b> T/S/D FACILITY <u>Rockwell Hanford</u> E.P.A. ID Code No. <u>WA 789-000-8967</u> Address <u>Richland WA</u> Destination <u>Chemical Trench</u> Phone <u>1 E Luct 373-9802</u>	<b>FROM:</b> Generator <u>Rockwell Hanford</u> E.P.A. ID Code No. <u>WA 789-000-8967</u> Address <u>2707 W</u> Origin Phone <u>L. Guerra 3-2351</u>
---	--

No. Shipping Units	D.O.T. PROPER SHIPPING NAME	HAZARD CLASS	Haz. Mat. I.D. No.	EPA Haz. Waste No.	WEIGHT	LABELS REQUIRED (or Exemption No.)
36	Fenamine (Empty, triple rinsed)	ORM-A	NA1765	U232		NONE
1	Dry waste - triple bagged	ORM-A	NA1765	U232		NONE

### PLACARDS REQUIRED

NOTE - Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property. The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding \$ \_\_\_\_\_ Per \_\_\_\_\_

Subject to Section 7 of the conditions, if this shipment is to be delivered to the consignee without recourse on the consignor, the consignor shall sign the following statement:  
The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.

**FREIGHT CHARGES**  
 PREPAID ☐ COLLECT ☐

(Signature of Consignor)

RECEIVED, subject to the classifications and tariffs in effect on the date of the issue of this Bill of Lading, the property described above in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, consigned, and destined as indicated above which said carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed as to each carrier of all or any of, said property over all or any portion of said route to destination and as to each party at any time interested in all or any said property, that every service to be performed hereunder shall be subject to all the bill of lading terms and conditions in the governing classification on the date of shipment.  
 Shipper hereby certifies that he is familiar with all the bill of lading terms and conditions in the governing classification and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

ALTERNATE DESTINATION (EMERGENCY ONLY)	EMERGENCY RESPONSE INFORMATION
T/S/D FACILITY <u>N/A</u> E.P.A. ID Code No. _____ Address _____ Destination _____	CONTACT Name <u>GR CN</u> Phone <u>373-3679</u> National Response Center <u>1-800-424-8802</u> <span style="float: right;">in D. C. 426-2675</span>

### CERTIFICATION

This is to certify that the above named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the E.P.A.

Generator Signature L. Guerra 9/6/84 Date \_\_\_\_\_

TRANSPORTER #1 WALTER L SAUNDERS E.P.A. ID No. WA-789-000-8967  
 Address 2707 W 200 WEST  
 City Richland State WA Zip \_\_\_\_\_ Phone 3-2351

Transporter No. 1 This is to certify acceptance of the hazardous waste shipment.  
 Signature Walter Saunders Date 9-13-84

TRANSPORTER #2 \_\_\_\_\_ E.P.A. ID No. \_\_\_\_\_  
 Address \_\_\_\_\_  
 City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Phone \_\_\_\_\_

Transporter No. 2 This is to certify acceptance of the hazardous waste shipment.  
 Signature \_\_\_\_\_ Date \_\_\_\_\_

TREATMENT/STORAGE/DISPOSAL FACILITY  
 This is to certify acceptance of the hazardous waste for treatment, storage, or disposal.  
 T/S/D FACILITY Signature A E F... Date 9-13-1984

**TRANSPORTER #2 COPY**

000348

7-BLS-C (6 PLY)

# HAZARDOUS WASTE MANIFEST

## THIS SHIPPING ORDER

must be legibly filled in, in ink, in indelible pencil, or in Carbon, and retained by the Agent.

MANIFEST DOCUMENT NUMBER

7/33

TO: GARY COX - ROCKWELL WASTE  
T/S/D FACILITY STORAGE

E.P.A. ID Code No. WA 789-000-8967

Address BLDG. 2727-S/200W

Destination HANFORD

Phone 3-3679

FROM: RAY GALLOWAY  
Generator ROCKWELL MATERIAL

E.P.A. ID Code No. WA 789-000-8967

Address BLDG. 1166/1100 AREA

Origin HANFORD

Phone 6-7110

No Shipping Units	D.O.T. PROPER SHIPPING NAME	HAZARD CLASS	Haz. Mat. I.D. No.	EPA Haz. Waste No.	WEIGHT	LABELS REQUIRED (or Exemption No.)
1	DIOXANE, WASTE	FLAMMABLE LIQUID	UN-1165	U108	210 lbs	FLAMMABLE LIQUID
	1 DOT 17-H 30 GAL STC STEEL DRUM WITH FIVE - ONE PINT BOTTLES OF					
	DIOXANE, FLAMMABLE LIQUID PACKED IN A F/B CARTON WITH F/B SEPARATORS					
	REMAINING VOID FILLED WITH CLAY ABSORBENT.					

PLACARDS REQUIRED NONE

NOTE - Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property. The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding \$ \_\_\_\_\_ Per \_\_\_\_\_

Subject to Section 7 of the conditions, if this shipment is to be delivered to the consignee without recourse on the consignor, the consignor shall sign the following statement:  
The consignor shall not make delivery of this shipment without payment of freight and all other lawful charges.

FREIGHT CHARGES  
PREPAID ☒ COLLECT ☐

(Signature of Consignor)

RECEIVED, subject to the classifications and tariffs in effect on the date of the issue of this Bill of Lading, the property described above in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, consigned, and destined as indicated above which said carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed as to each carrier of all or any of, said property over all or any portion of said route to destination and as to each party at any time interested in all or any said property, that every service to be performed hereunder shall be subject to all the bill of lading terms and conditions in the governing classification on the date of shipment. Shipper hereby certifies that he is familiar with all the bill of lading terms and conditions in the governing classification and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

### ALTERNATE DESTINATION (EMERGENCY ONLY)

T/S/D FACILITY NONE

E.P.A. ID Code No.

Address

Destination

### EMERGENCY RESPONSE INFORMATION

CONTACT Name C.D. HANSEN

Phone 6-7494

National Response Center

1-800-424-8802  
in D. C. 426-2675

### CERTIFICATION

This is to certify that the above named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the E.P.A.

Generator

Signature

C.D. HANSEN

Date 7-11-84

TRANSPORTER #1 John Wayne Cox

E.P.A. ID No.

Address RHO

City Richland

State Wa Zip 99352 Phone 376-8860

Transporter No. 1

Signature

This is to certify acceptance of the hazardous waste shipment.

Date

TRANSPORTER #2

E.P.A. ID No.

Address

City

State Zip Phone

Transporter No. 2

Signature

This is to certify acceptance of the hazardous waste shipment.

Date

### TREATMENT/STORAGE/DISPOSAL FACILITY

T/S/D FACILITY

Signature

This is to certify acceptance of the hazardous waste for treatment, storage, or disposal.

A. N. Brown for G. Cox

Date

000349

7/13/84

TRANSPORTED #1 CODV

7-11-84 16 Pt V1

# HAZARDOUS WASTE MANIFEST

## STRAIGHT BILL OF LADING

ORIGINAL - NOT NEGOTIABLE

MANIFEST DOCUMENT NUMBER

7/33

TO: GARY COX - ROCKWELL WASTE  
S/D FACILITY STORAGE  
P.A. ID Code No. WA 789-000-8967  
Address BLDG. 2727-S/200W  
Destination HANFORD  
Phone 3-3679

FROM: RAY GALLOWAY  
Generator ROCKWELL MATERIAL  
E.P.A. ID Code No. WA 789-000-8967  
Address BLDG. 1166/1100 AREA  
Origin HANFORD  
Phone 6-7110

D.O.T. PROPER SHIPPING NAME	HAZARD CLASS	Haz. Mat. ID No.	EPA Haz Waste No.	WEIGHT	LABELS REQUIRED (or Exemption No.)
DIOXANE, WASTE	FLAMMABLE LIQUID	UN-1165	U108	210 lbs	FLAMMABLE LIQUID
1 DOT 17-H 30 GAL STC STEEL DRUM WITH FIVE - ONE PINT BOTTLES OF					
DIOXANE, FLAMMABLE LIQUID PACKED IN A F/B CARTON WITH F/B SEPARATORS					
REMAINING VOID FILLED WITH CLAY ABSORBENT.					

ACARDS REQUIRED NONE

E - Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property. The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding \$ \_\_\_\_\_ Per \_\_\_\_\_

Subject to Section 7 of the conditions, if this shipment is to be delivered to the consignee without recourse to the consignor, the consignor shall sign the following statement:  
The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.

FREIGHT CHARGES  
PREPAID ☒ COLLECT ☐

RECEIVED, subject to the classifications and tariffs in effect on the date of the issue of this Bill of Lading, the property described above in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, consigned, and destined as indicated above which said carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed as to each carrier of all bill of lading terms and conditions in the governing classification on the date of shipment. Shipper hereby certifies that he is familiar with all the bill of lading terms and conditions in the governing classification and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

### ALTERNATE DESTINATION (EMERGENCY ONLY)

S/D FACILITY NONE  
P.A. ID Code No.  
Address  
Destination

### EMERGENCY RESPONSE INFORMATION

CONTACT Name C.D. HANSEN  
Phone 6-7494  
National Response Center 1-800-424-8802  
In D. C. 426-2675

### CERTIFICATION

This is to certify that the above named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the E.P.A.

Generator Signature *C.D. Hansen* C.D. HANSEN Date 7-11-84

TRANSPORTER #1 John Wayne Carr E.P.A. ID No.  
Address RHO  
Richland State Wa. Zip 99352 Phone 376-8860

This is to certify acceptance of the hazardous waste shipment.

Transporter No. 1 Signature \_\_\_\_\_ Date \_\_\_\_\_

TRANSPORTER #2 E.P.A. ID No.

Address \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Phone \_\_\_\_\_

This is to certify acceptance of the hazardous waste shipment.

Transporter No. 2 Signature \_\_\_\_\_ Date \_\_\_\_\_

### TREATMENT/STORAGE/DISPOSAL FACILITY

This is to certify acceptance of the hazardous waste for treatment, storage, or disposal.  
S/D FACILITY H.N. Brown for G. Cox  
Address \_\_\_\_\_ Date 7/13/89

000350

ORIGINAL RETURN TO GENERATOR

HAZARDOUS WASTE

# HAZARDOUS WASTE MANIFEST

## THIS SHIPPING ORDER

must be legibly filled in, in ink, in indelible pencil, or in Carbon, and retained by the Agent.

MANIFEST DOCUMENT NUMBER

11-3

TO: T/S/D FACILITY <u>RHO</u>	FROM: Generator <u>ROCKWELL</u>
E.P.A. ID Code No. <u>WA 789-000-8967</u>	E.P.A. ID Code No. <u>WA 789-000-8967</u>
Address <u>RICHLAND, WA HANFORD RES.</u>	Address <u>202A 1200E</u>
Destination <u>CHEMICAL TRENCH-CENTRAL LANDFILL</u>	Origin <u>CHEMICAL MAKE-UP</u>
Phone <u>3-3679</u>	Phone <u>3-2323</u>

No. Shipping Units	D.O.T. PROPER SHIPPING NAME	HAZARD CLASS	Haz. Mat I.D. No.	EPA Haz Waste No.	WEIGHT	LABELS REQUIRED (or Exemption No.)
21	NITRATE N.O.S. (HYDROXYLAMINE NITRATE)	OXIDIZER	NA1477	D003	315#	OXIDIZER
17	CORROSIVE LIQUID N.O.S. (FERROUS SULFAMATE)	CORROSIVE	UN1760	D002	255#	CORROSIVE

### PLACARDS REQUIRED

NOTE - Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property. The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding \$ \_\_\_\_\_ Per \_\_\_\_\_

Subject to Section 7 of the conditions, if this shipment is to be delivered to the consignee without recourse on the consignee, the consignor shall sign the following statement: The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.

### FREIGHT CHARGES

PREPAID ☐ COLLECT ☐

(Signature of Consignor)

RECEIVED, subject to the classifications and tariffs in effect on the date of the issue of this Bill of Lading, the property described above in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, consigned, and destined as indicated above which said carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed as to each carrier or all or any of, said property over all or any portion of said route to destination and as to each party at any time interested in all or any said property, that every service to be performed hereunder shall be subject to all the bill of lading terms and conditions in the governing classification on the date of shipment. Shipper hereby certifies that he is familiar with all the bill of lading terms and conditions in the governing classification and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

### ALTERNATE DESTINATION (EMERGENCY ONLY)

T/S/D FACILITY NONE  
E.P.A. ID Code No. N/A  
Address N/A  
Destination N/A

### EMERGENCY RESPONSE INFORMATION

CONTACT Name GARY COX  
Phone 3-3679  
National Response Center 1-800-424-8802  
In D. C. 426-2675

### CERTIFICATION

This is to certify that the above named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the E.P.A.

Generator Signature Ronald L. Nelson

Date 8-24-84

TRANSPORTER #1 L.D. Keller E.P.A. ID No. \_\_\_\_\_

Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Phone \_\_\_\_\_

Transporter No. 1 Signature [Signature] This is to certify acceptance of the hazardous waste shipment.

Date 8-24-84

TRANSPORTER #2 \_\_\_\_\_ E.P.A. ID No. \_\_\_\_\_

Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Phone \_\_\_\_\_

Transporter No. 2 Signature \_\_\_\_\_ This is to certify acceptance of the hazardous waste shipment.

Date 000351

### TREATMENT/STORAGE/DISPOSAL FACILITY

T/S/D FACILITY This is to certify acceptance of the hazardous waste for treatment, storage, or disposal.

Signature [Signature] Date 8-24-84

TRANSPORTER #1 COPY

# HAZARDOUS WASTE MANIFEST

## THIS SHIPPING ORDER

must be legibly filled in, in ink, in indelible pencil, or in Carbon, and retained by the Agent.

MANIFEST DOCUMENT NUMBER

11-3

TO: T/S/D FACILITY <u>RHO</u>	FROM: Generator <u>ROCKWELL</u>
E.P.A. ID Code No. <u>WA 789-000-8967</u>	E.P.A. ID Code No. <u>WA 789-000-8967</u>
Address <u>RICHLAND, WA HANFORD RES.</u>	Address <u>202A / 200E</u>
Destination <u>CHEMICAL TRENCH-CENTRAL LANDFILL</u>	Origin <u>CHEMICAL MAKE-UP</u>
Phone <u>3-3679</u>	Phone <u>3-2323</u>

No. Shipping Units	D.O.T. PROPER SHIPPING NAME	HAZARD CLASS	Haz. Mat. I.D. No.	EPA Haz. Waste No.	WEIGHT	LABELS REQUIRED (or Exemption No.)
21	NITRATE N.O.S. (HYDROXYLAMINE NITRATE)	OXIDIZER	NA1477	D003	315#	OXIDIZER
17	CORROSIVE LIQUID N.O.S. (FERROUS SULFAMATE)	CORROSIVE	UN1760	D002	255#	CORROSIVE

### PLACARDS REQUIRED

NOTE - Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property. The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding \$ \_\_\_\_\_ Per \_\_\_\_\_

Subject to Section 7 of the conditions, if this shipment is to be delivered to the consignee without recourse on the carrier, the consignee shall sign the following statement:  
The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.

(Signature of Consignee)

### FREIGHT CHARGES

PREPAID ☐ COLLECT ☐

RECEIVED, subject to the classifications and tariffs in effect on the date of the issue of this Bill of Lading, the property described above in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, consigned, and destined as indicated above which said carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed as to each carrier of all or any of, said property over all or any portion of said route to destination and as to each party at any time interested in all or any said property, that every service to be performed hereunder shall be subject to all the bill of lading terms and conditions in the governing classification on the date of shipment. Shipper hereby certifies that he is familiar with all the bill of lading terms and conditions in the governing classification and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

### ALTERNATE DESTINATION (EMERGENCY ONLY)

T/S/D FACILITY NONE  
E.P.A. ID Code No. N/A  
Address N/A  
Destination N/A

### EMERGENCY RESPONSE INFORMATION

CONTACT Name GARY COX  
Phone 3-3679  
National Response Center 1-800-424-8802  
in D. C. 426-2675

### CERTIFICATION

This is to certify that the above named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the E.P.A.

Generator Signature Ronald L. Nelson Date 8-24-84

TRANSPORTER #1 L.D. Felt E.P.A. ID No. \_\_\_\_\_

Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Phone \_\_\_\_\_

Transporter No. 1 Signature [Signature] This is to certify acceptance of the hazardous waste shipment. Date 8-24-84

TRANSPORTER #2 \_\_\_\_\_ E.P.A. ID No. \_\_\_\_\_

Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Phone \_\_\_\_\_

Transporter No. 2 Signature \_\_\_\_\_ This is to certify acceptance of the hazardous waste shipment. Date 000352

### TREATMENT/STORAGE/DISPOSAL FACILITY

T/S/D FACILITY Signature [Signature] This is to certify acceptance of the hazardous waste for treatment, storage, or disposal. Date 8-24-84

TRANSPORTER #2 CDV

7-BESC (6-PLY)

# HAZARDOUS WASTE MANIFEST

## THIS SHIPPING ORDER

must be legibly filled in, in ink, in Indelible Pencil, or in Carbon, and retained by the Agent.

MANIFEST DOCUMENT NUMBER

WHC 84-001

TO: T/S/D FACILITY <u>Rockwell Hanford</u>	FROM: Generator <u>Westinghouse Hanford</u>
E.P.A. ID Code No. <u>WA 789000 8967</u>	E.P.A. ID Code No. <u>WA 78000 8967</u>
Address <u>Hanford</u>	Address <u>Hanford</u>
Destination <u>200 Area / Chem Transfer / Corrosive</u>	Origin <u>300 Area / Power House</u>
Phone <u>3-3516</u>	Phone <u>6-3012</u>

No. Shipping Units	D.O.T. PROPER SHIPPING NAME	HAZARD CLASS	Haz. Mat I.D. No.	EPA Haz Waste No.	WEIGHT	LABELS REQUIRED (or Exemption No.)
16	Deerborn Corrosive Sludge 600 Material	Corrosive	UN1759			Empty Corrosive
10	Deerborn Corrosive 653 Material	Corrosive	UN1759			Empty Corrosive
8	Deerborn Corrosive Steammate Material	Corrosive	UN1759			Empty

### PLACARDS REQUIRED

NOTE - Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property. The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding \$ \_\_\_\_\_ Per \_\_\_\_\_

Subject to Section 7 of the conditions, if this shipment is to be delivered to the consignee without recourse on the carrier, the carrier shall sign the following statement: The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.

FREIGHT CHARGES  
PREPAID ☐ COLLECT ☐

RECEIVED, subject to the classifications and tariffs in effect on the date of the issue of this Bill of Lading, the property described above in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, consigned, and destined as indicated above which said carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed as to each carrier of all or any of, said property over all or any portion of said route to destination and as to each party at any time interested in all or any said property, that every service to be performed hereunder shall be subject to all the bill of lading terms and conditions in the governing classification on the date of shipment. Shipper hereby certifies that he is familiar with all the bill of lading terms and conditions in the governing classification and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

### ALTERNATE DESTINATION (EMERGENCY ONLY)

T/S/D FACILITY \_\_\_\_\_  
E.P.A. ID Code No. N/A  
Address \_\_\_\_\_  
Destination \_\_\_\_\_

### EMERGENCY RESPONSE INFORMATION

CONTACT Name Henry Bautista  
Phone 3-3516  
National Response Center 1-800-424-8802  
in D. C. 426-2675

### CERTIFICATION

This is to certify that the above named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the E.P.A.

Generator Signature RD Nensey Date 8-13-84

TRANSPORTER #1 Rockwell Hanford E.P.A. ID No. WA 789000 8967  
Address 1100 Area  
City Richland State WA Zip \_\_\_\_\_ Phone \_\_\_\_\_

Transporter No. 1 Signature Donald D. Gandy Date 8/13/84

TRANSPORTER #2 \_\_\_\_\_ E.P.A. ID No. \_\_\_\_\_  
Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Phone \_\_\_\_\_

Transporter No. 2 Signature \_\_\_\_\_ Date 000353

### TREATMENT/STORAGE/DISPOSAL FACILITY

T/S/D FACILITY Signature Charmaine G. Hadley Date 8/13/84

TRANSPORTER #1 CDV

7-BLS-C-16-PLV

# HAZARDOUS WASTE MANIFEST

## THIS SHIPPING ORDER

must be legibly filled in, in ink, in indelible pencil, or in Carbon, and retained by the Agent.

MANIFEST DOCUMENT NUMBER

10HC 84-002

TO: T/S/D FACILITY <u>Rockwell Hanford</u>	FROM: Generator <u>Washing House Hanford</u>
E.P.A. ID Code No. <u>WA 780008967</u>	E.P.A. ID Code No.
Address <u>Richland</u>	Address <u>Richland</u>
Destination <u>Chemical Transfer</u>	Origin <u>300 Area</u>
Phone <u>2-4106</u>	Phone <u>6-3743</u>

No Shipping Units	D.O.T. PROPER SHIPPING NAME	HAZARD CLASS	Haz. Mat. I.D. No.	EPA Haz. Waste No.	WEIGHT	LABELS REQUIRED (or Exemption No.)
16	Empty HN drums	Not Regulated	N/A	N/A		Empty
8	Empty Open top drums	Not Regulated	N/A	N/A		Empty
2	Empty oil drums	Not Regulated	N/A	N/A		Empty
4	Empty Cutting oil drums	Not Regulated	N/A	N/A		Empty
3	Empty Sodium Hydride	Corrosive	UN 1824	0002		Empty Corrosive
10	Empty Paint thinner drums	Flammable	UN 1993	N/A		Empty, Flammable

### PLACARDS REQUIRED

NOTE - Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property. The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding \$ \_\_\_\_\_ Per \_\_\_\_\_

Subject to Section 7 of the conditions, if this shipment is to be delivered to the consignee without recourse on the consignor, the consignor shall sign the following statement:  
The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.

(Signature of Consignor)

### FREIGHT CHARGES

PREPAID ☐ COLLECT ☐

RECEIVED, subject to the classifications and tariffs in effect on the date of the issue of this Bill of Lading, the property described above in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, consigned, and destined as indicated above which said carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed as to each carrier of all or any of, said property over all or any portion of said route to destination and as to each party at any time interested in all or any said property, that every service to be performed hereunder shall be subject to all the bill of lading terms and conditions in the governing classification on the date of shipment. Shipper hereby certifies that he is familiar with all the bill of lading terms and conditions in the governing classification and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

ALTERNATE DESTINATION (EMERGENCY ONLY)	EMERGENCY RESPONSE INFORMATION
T/S/D FACILITY _____	CONTACT Name <u>L. LUST</u>
E.P.A. ID Code No. _____	Phone <u>273-4106</u>
Address _____	National Response Center 1-800-424-8802
Destination _____	in D. C. 426-2675

### CERTIFICATION

This is to certify that the above named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the E.P.A.

Generator Signature R. D. Hunsaker Date 8-23-84

TRANSPORTER #1 R.H.O. Transportation E.P.A. ID No. WA 780008967  
Address R.H.O. 400 Area  
City Richland State WA Zip 99111 Phone 6-6654

This is to certify acceptance of the hazardous waste shipment.  
Transporter No. 1 Signature [Signature] Date 8-23-84

TRANSPORTER #2 T. J. & P. Co. Inc. E.P.A. ID No. \_\_\_\_\_  
Address 1120 E. 4th St. Spokane  
City Spokane State WA Zip 99201 Phone 325-8800

This is to certify acceptance of the hazardous waste shipment.  
Transporter No. 2 Signature \_\_\_\_\_ Date 000351

### TREATMENT/STORAGE/DISPOSAL FACILITY

This is to certify acceptance of the hazardous waste for treatment, storage, or disposal.  
T/S/D FACILITY Signature [Signature] Date 8-23-84

TRANSPORTER #2 COPY

7-BLSC (6 PLY)



## HAZARDOUS WASTE MANIFEST

## THIS SHIPPING ORDER

must be legibly filled in, in ink, in indelible pencil, or in carbon, and retained by the Agent.

## MANIFEST DOCUMENT NUMBER

WMC 84-001 10-25A

TO:	FROM:
T/S/D FACILITY <u>Rockwell Hanford</u>	Generator <u>Westinghouse Hanford</u>
E.P.A. ID Code No. <u>WA 7890008967</u>	E.P.A. ID Code No. <u>WA 780008967</u>
Address <u>Hanford</u>	Address <u>Hanford</u>
Destination <u>200 River / Chem Transfer / Consignee</u>	Origin <u>300 River / Power house</u>
Phone <u>3-3516</u>	Phone <u>6-3012</u>

No. Shipping Units	D.O.T. PROPER SHIPPING NAME	HAZARD CLASS	Haz. Mat I.D. No.	EPA Haz. Waste No.	WEIGHT	LABELS REQUIRED (or Exemption No.)
16	<u>Deanborn</u> <u>Consignment</u> <u>Spent Fuel 600</u> <u>Material</u>	<u>Corrosive</u>	<u>UN1759</u>			<u>Empty</u> <u>Corrosive</u>
10	<u>Deanborn</u> <u>Consignment</u> <u>623</u> <u>Material</u>	<u>Corrosive</u>	<u>UN1759</u>			<u>Empty</u> <u>Corrosive</u>
8	<u>Deanborn</u> <u>Consignment</u> <u>Steam matts</u> <u>Material</u>	<u>Corrosive</u>	<u>UN1759</u>			<u>Empty</u> <u>Corrosive</u>

## PLACARDS REQUIRED

NOTE - Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property. The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding \$ _____ Per _____	Subject to Section 7 of the conditions, if this shipment is to be delivered to the consignee without recourse to the carrier, the carrier shall sign the following statement: The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges. (Signature of Carrier)	FREIGHT CHARGES PREPAID <input type="checkbox"/> COLLECT <input type="checkbox"/>
--	--	--

RECEIVED, subject to the classifications and tariffs in effect on the date of the issue of this Bill of Lading, the property described above in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, consigned, and destined as indicated above, which said carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed as to each carrier of all or any of, said property over all or any portion of said route to destination and as to each party at any time interested in all or any said property, that every service to be performed hereunder shall be subject to all the bill of lading terms and conditions in the governing classification on the date of shipment. Shipper hereby certifies that he is familiar with all the bill of lading terms and conditions in the governing classification and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

ALTERNATE DESTINATION (EMERGENCY ONLY)	EMERGENCY RESPONSE INFORMATION
T/S/D FACILITY _____	CONTACT Name <u>Hanley Boynton</u>
E.P.A. ID Code No. <u>N/A</u>	Phone <u>3-3516</u>
Address _____	National Response Center 1-800-424-8802
Destination _____	in D. C. 426-2675

## CERTIFICATION

This is to certify that the above named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the E.P.A.

Generator Signature <u>RD Henry</u>	Date <u>8-13-84</u>
TRANSPORTER #1 <u>Rockwell Hanford</u>	E.P.A. ID No. <u>WA 780008967</u>
Address <u>100 River</u>	
City <u>Richland</u>	State <u>WA</u> Zip _____ Phone _____

This is to certify acceptance of the hazardous waste shipment.	
Transporter No. 1 Signature <u>Donald D. Grant</u>	Date <u>8/13/84</u>
TRANSPORTER #2 _____	E.P.A. ID No. _____
Address _____	
City _____	State _____ Zip _____ Phone _____

This is to certify acceptance of the hazardous waste shipment.	
Transporter No. 2 Signature _____	Date _____

## TREATMENT/STORAGE/DISPOSAL FACILITY

This is to certify acceptance of the hazardous waste for treatment, storage, or disposal.	
T/S/D FACILITY Signature <u>[Signature]</u>	Date <u>8-13-84</u>

TRANSPORTER #2 COPY

000355

7-BLS-C (6-RLM)  
REV 10/80

# REQUEST TO DISPOSE OF NONRADIOACTIVE HAZARDOUS WASTE

I. **GENERATION:** The Generator should complete Part I and forward this form to:

WS&DT  
202-S/200 West  
Rockwell

10-25

A. Generator's Name: Westinghouse Phone: \_\_\_\_\_ Address: \_\_\_\_\_ Company: WHC

B. Custodian's Name: RO Hensy Phone: 6-3743 Address: 300 Area Company: \_\_\_\_\_

C. Waste Description: (If more than five items, attach additional sheets)

W/B79

Generic Name	Total Quantity	Type of Container	Number of Containers	(Check One)			Hazard Class
				Sol.	Liq.	Gas	
1. <u>Sludgital 600</u>		<u>55 gal drum</u>	<u>13</u>		<input checked="" type="checkbox"/>		<u>Empty</u>
2. <u>Desorb 653</u>		<u>✓</u>	<u>8</u>		<input checked="" type="checkbox"/>		<u>✓</u>
3. <u>Steammate 2004</u>		<u>✓</u>	<u>6</u>		<input checked="" type="checkbox"/>		<u>✓</u>
4. <u>Desorb 874</u>		<u>✓</u>	<u>2</u>		<input checked="" type="checkbox"/>		<u>✓</u>
5. <u>Prin Thinner</u>		<u>✓</u>	<u>#10</u>		<input checked="" type="checkbox"/>		<u>✓</u>

D. Have appropriate labels been affixed to containers? \_\_\_\_\_ Not required Empty

E. Have efforts been made to recycle (e.g., excess) waste? yes

F. Has waste been treated in any manner? \_\_\_\_\_ If so, how? \_\_\_\_\_

G. Storage Location: former house and storage yard 300 Area

H. "I hereby certify that this material has been released by Radiation Monitoring (if applicable) and that Part One of this form has been completed to the best of my knowledge." Survey Card Number: 890653 E. Hensy 8/10/84

Generator's Signature: RO Hensy Date: 7-11-84

## II. APPROVAL

A. Approved for disposal by Name: Mary B. Weihs Phone: 3-4033 Address 2750-F Co.: Rockwell  
Date: 7-25-84 Signature: Mary B Weihs

B. Packaging Requirements (specify): Refer to Disposal Analysis 10-25

C. Disposal Location: Crossine ☒ Chemical Trench, \_\_\_\_\_ Asbestos Trench,  
(check one) \_\_\_\_\_ 212-P (Storage), \_\_\_\_\_ Other

## III. TRANSPORTATION/DISPOSAL 28 Drums: Items 1-4 above.

A. Transporter(s) Name: \_\_\_\_\_ Phone: \_\_\_\_\_ Address: \_\_\_\_\_ Company: \_\_\_\_\_

B. Date Transported/Disposed: 8.13.84 BTH

C. Transporter's Signature: \_\_\_\_\_

000356

# Internal Letter



Rockwell International

Date: September 21, 1983

No. 65950-83-1475

TO: (Name, Organization, Internal Address)  
R. E. Callaway  
Material  
1166/1100 Area

FROM: (Name, Organization, Internal Address, Phone)  
H. C. Boynton (3-3516)  
Solid Waste Processing &  
Disposal Unit  
2750E/A104/200E

Subject: Approved Disposal Request 4.9 (Rockwell)

The disposal methods for chemical reagents listed on Disposal Request 4-9 is prescribed on the attached Disposal Request Analysis. Instructions based upon chemical compatibilities is provided should reagents be combined in a common overpack. The packaging of unopened chemical containers does not require laboratory packing in metal drums, which is the method used only for unsealed containers.

All packaging, labeling, and marking of waste reagents shall be completed in accordance with Department of Transportation (DOT) regulations (CFR 171-179). A Hazardous Waste Manifest is required to accompany all waste shipments in accordance with 40 CFR 263.

Arrangements for transporting waste materials to the 2727-S storage facility (for forwarding to offsite disposal) and transporting onsite disposal packages directly to the Hanford Non-Radioactive Hazardous Waste Disposal Trench is a generator responsibility and may be implemented upon compliance with the stated disposal request instructions and Hazardous Waste Manifest requirements.

Should you require further assistance regarding the disposition of wastes listed on Disposal Request 4-9, please contact the following Rockwell personnel.

H. C. Boynton  
(3-3516)  
G. C. Cox  
(3-3679)  
D. L. McCall  
(6-1651)  
A. D. Poor  
(6-1420)

Solid Waste Processing & Disposal  
Industrial Hygiene & Safety  
(2727-S Coordinator)  
Material  
Transportation

*H. C. Boynton*  
H. C. Boynton, Engineer  
Solid Waste Processing &  
Disposal Unit

10:30 A.M.  
Gene,

5/3/84

HCB/cl

Attachments

cc w/out attachments: J. E. Albaugh  
G. R. Cox  
D. R. Groth  
D. L. McCall  
A. D. Poor

Dennis Poor has the original. This will work for now, just transfer the info to the original at the end of the day. Gary R. Cox

000357

# REQUEST TO DISPOSE OF NONRADIOACTIVE HAZARDOUS WASTE

I. GENERATION: The Generator should complete Part I and forward this form to:

WS&DT  
202-S/200 West  
Rockwell

4-9

A. Generator's Name: R.E. CALLAWAY Phone: 6-0906 Address: 1100/1166 Company: RHO

B. Custodian's Name: R.E. CALLAWAY Phone: 6-7110 Address: 1100/1166 Company: RHO

C. Waste Description: (If more than five items, attach additional sheets)

Generic Name	Total Quantity	Type of Container	Number of Containers	(Check One)			Hazard Class
				Sol.	Liq.	Gas	
1. SEE ATTACHED LIST							
2.							
3.							
4.							
5.							

D. Have appropriate labels been affixed to containers? YES Not required \_\_\_\_\_

E. Have efforts been made to recycle (e.g., excess) waste? YES

F. Has waste been treated in any manner? NO If so, how? \_\_\_\_\_

G. Storage Location: 1166 BLDG, 1100 AREA

H. "I hereby certify that this material has been released by Radiation Monitoring (if applicable) and that Part One of this form has been completed to the best of my knowledge." Survey Card Number: NAT APP LIC 17312

Generator's Signature: R.E. Callaway Date: 6/8/83

## APPROVAL

Approved for disposal by Name: W.C. Bunker Phone: 3-3516 Address: 3750 E Co.: RHO

Date: 9-20-83 Signature: W.C. Bunker

I. Packaging Requirements (specify): Re See To Int. mail Letter Sep 21, 1983 RHO Bunker To RE Callaway including Disposal analysis

J. Disposal Location: \_\_\_\_\_ Chemical Trench \_\_\_\_\_ Asbestos Trench, \_\_\_\_\_  
(check one) \_\_\_\_\_ 212-P (Storage). 2727-5 Other \_\_\_\_\_

## TRANSPORTATION/DISPOSAL

Transporter(s) Name: J.A. Fee Phone: 3-6178 Address: 1171 Company: RHO

Date Transported/Disposed: 5-3-1984 DET-Sub

Transporter(s) Signature: Jeff A Fee

000358

## DISPOSAL ANALYSIS 4-9 (ONSITE DISPOSAL)

Packaging and Waste Manifest information for those chemicals to be shipped to the Hanford Non-Radioactive Hazardous Waste Chemical Trench.

Hazard class and packaging compatibility:

DISPOSAL REQUEST NO.	SHIPPING NAME	EPA NO.	ID NO.	LABEL	NO. OF CONTAINERS	CONTAINER TYPE	QUANTITY Per CONTAINER
<u>Flammability Liquid</u>							
1.	Acetone	U002	UN1090	Flammable Liquid	7	Glass	1 pint
2.	Butyl alcohol	U031	NA1120	Flammable Liquid	31	Glass	1 pound
<u>Combustible Liquid</u>							
21.	Glycerine (alcohol n.o.s.)	NA	UN1997	None	23	Glass	1 pint
15.	Dextrose anhydrous		Non-Hazardous		3	Plastic	1 pound
27.	Potassium dichloride		"		8	Plastic	1 pound
36.	Sodium chloride		"		24	Plastic	5 pounds
40.	Sodium silica		"		30	Plastic	1 pound

DISPOSAL REQUEST NO.	SHIPPING NAME	EPA NO.	ID NO.	LABEL	NO. OF CONTAINERS	CONTAINER TYPE	QUANTITY Per CONTAINER
38.	Sodium nitrate	D003	UN1500	Oxidizer	1	Plastic	1 pound
42.	Strontium nitrate	D003	UN1507	Oxidizer	9	Plastic	1 pound
44.	Zirconyl nitrate	D003	UN2728	Oxidizer	9	Glass	1 ounce
12.	Calcium carbonate	NON-HAZARDOUS			23	Plastic	1 pound
17.	Ferric oxide		"		48	Plastic	1 pound
30.	Potassium phosphate		"		5	Plastic	1 pound
31.	Potassium phosphate		"		2	Glass	1 pound
34.	Sodium acetate		"		3	Plastic	1 pound
35.	Sodium bicarbonate		"		9	Plastic	1 pound

ORM-A

7.	Aluminum oxide (ORMA n.o.s.)	NA	NA1693	None	8	Plastic	1 pound
8.	Ammonium carbonate	NA	NA9084	None	21	Plastic	1 pound

ORM-B

26.	Potassium hydrogen sulfate	NA	UN2509	None	1	Plastic	1 pound
-----	-------------------------------	----	--------	------	---	---------	---------

ORM-E

9.	Ammonium chloride	NA	NA9085	None	2	Glass	1 pound
39.	Sodium phosphate	NA	NA9147	None	4	Plastic	1 pound
40.	Penn salt Cleaner A-28	NA	None	None	19	Fiberboard drum	325 lbs/drum
41.	Empty drum	NA	None	None	1	55 gal. drum	Empty

DISPOSAL REQUEST NO.	SHIPPING NAME	EPA NO.	ID NO.	LABEL	NO. OF CONTAINERS	CONTAINER TYPE	QUANTITY per CONTAINER
<u>Corrosive Material Acids</u>							
2.	Hydrofluoric acid	U134	UN1790	Corrosive	100	Plastic	1 pound
3.	Sulfamic acid (corrosive solid n.o.s.)	NA	UN1759	Corrosive	25	Plastic	100 grams
4.	Trichloroacetate (corrosive solid n.o.s.)	NA	UN1759	Corrosive	79	Plastic	1 pound
<u>Corrosive Material Base</u>							
23.	Lithium hydroxide (corrosive solid n.o.s.)	D002	UN1759	Corrosive	5	Plastic	1 pound
37.	Sodium hydroxide	D002	UN1223	Corrosive	18	Plastic	5 pounds
<u>Oxidizers</u>							
6.	Aluminum nitrate	D003	UN1438	Oxidizer	11	Plastic	1 pound
14.	Capric nitrate	D003	NA1479	Oxidizer	16	Glass	1/4 pound
24.	Magnesium nitrate	D003	UN1474	Oxidizer	18	Plastic	1 pound
25.	Magnesium oxide	D003	UN1476	Oxidizer	11	5-Plastic 6-Glass	1 pound 1 pound
28.	Potassium nitrate	D002	UN1486	Oxidizer	18	Plastic	1 pound
29.	Potassium permanganate	D002	UN1490	Oxidizer	79	Plastic	1 pound
33.	Silver nitrate	D002	UN1493	Oxidizer	3	Plastic	4 ounces

000061

# HAZARDOUS WASTE MANIFEST

**THIS SHIPPING ORDER**

must be legibly filled in, in ink, in indelible pencil, or in Carbon, and retained by the Agent.

MANIFEST DOCUMENT NUMBER

10-31

TO: <b>RHO</b> T/S/D FACILITY <b>CENTRAL LANDFILL-CHEM TRENCH</b>	FROM: <b>ROCKWELL</b> Generator
E.P.A. ID Code No. <b>WA 789-000-8967</b>	E.P.A. ID Code No. <b>WA 789-000-8967</b>
Address <b>HANFORD RES. RICHLAND, WA</b>	Address <b>202A / 200E</b>
Destination <b>CHEMICAL TRENCH-CENT LANDFILL</b>	Origin <b>CHEMICAL MAKE-UP</b>
Phone <b>373-3679</b>	Phone <b>3-2323</b>

No Shipping Units	D.O.T. PROPER SHIPPING NAME	HAZARD CLASS	Haz Mat ID No.	EPA Haz Waste No.	WEIGHT	LABELS REQUIRED (or Exemption No.)
22	POTASSIUM PERMANGANATE	OXIDIZER	UN1490	D003	220#	OXIDIZER
16	CORROSIVE LIQUID N.O.S (FSA) <sub>2</sub>	CORROSIVE	UN1760	D002	240#	CORROSIVE
15	NITRATE N.O.S (HN)	OXIDIZER	NA 1477	D003	225#	OXIDIZER

## PLACARDS REQUIRED

NOTE - Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property. The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding \$ \_\_\_\_\_ Per \_\_\_\_\_

Subject to Section 7 of the conditions, if this shipment is to be delivered to the consignee without recourse on the consignor, the consignor shall sign the following statement:  
The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.  
(Signature of Consignor)

FREIGHT CHARGES  
PREPAID ☐ COLLECT ☐

RECEIVED, subject to the classifications and tariffs in effect on the date of the issue of this Bill of Lading, the property described above in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, consigned and destined as indicated above which said carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed as to each carrier of all or any of, said property over all or any portion of said route to destination and as to each party at any time interested in all or any said property, that every service to be performed hereunder shall be subject to all the bill of lading terms and conditions in the governing classification on the date of shipment. Shipper hereby certifies that he is familiar with all the bill of lading terms and conditions in the governing classification and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

ALTERNATE DESTINATION (EMERGENCY ONLY)	EMERGENCY RESPONSE INFORMATION
T/S/D FACILITY <b>NONE</b>	CONTACT Name <b>GARY COX</b>
E.P.A. ID Code No. <b>N/A</b>	Phone <b>3-3679</b>
Address <b>N/A</b>	National Response Center <b>1-800-424-8802</b>
Destination <b>N/A</b>	in D. C. <b>426-2675</b>

## CERTIFICATION

This is to certify that the above named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the E.P.A.

Generator Signature \_\_\_\_\_ Date \_\_\_\_\_

TRANSPORTER #1 **RHO** E.P.A. ID No. **WA 789-000-8967**  
Address **PO Box 300**  
City **RICHLAND** State **WA** Zip **99352** Phone **376-6178**

Transporter No. 1 Signature **[Signature]** This is to certify acceptance of the hazardous waste shipment. Date **8-16-84**

TRANSPORTER #2 \_\_\_\_\_ E.P.A. ID No. \_\_\_\_\_  
Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Phone \_\_\_\_\_

Transporter No. 2 Signature \_\_\_\_\_ This is to certify acceptance of the hazardous waste shipment. Date \_\_\_\_\_

## TREATMENT/STORAGE/DISPOSAL FACILITY

T/S/D FACILITY Signature **D E T-helper** This is to certify acceptance of the hazardous waste for treatment, storage, or disposal. Date **8-16-1984**

TRANSMITTED #1 COPY

000362



GENERATION: The Generator should complete Part I and forward this form to:

W3807 SWP4D  
202-37200 West 2750 E / 200 E  
Rockwell

A. Generator's Name: Westinghouse Phone: \_\_\_\_\_ Address: \_\_\_\_\_ Company: \_\_\_\_\_

B. Custodian's Name: R. D. Hensyel Phone: 6-3743 Address: 300 Area Company: Westinghouse

C. Waste Description: (If more than five items, attach additional sheets)

Generic Name	Total Quantity	Type of Container	Number of Containers	(Check One)			Hazard Class
				Sol.	Liq.	Gas	
1. HN Hydroxylamanenitrate	Empty	55 gal.	16				Corrosive
2. Castic Soda	Empty	55 gal.	3				Corrosive
3. Open Top Drums	Empty	55 gal.	8				Contained Sand
4. Union Turbine Oil	Empty	55 gal.	2				Flammable
5. Cutting Fluid	Empty	55 gal.	4				

D. Have appropriate labels been affixed to containers? Yes Not required \_\_\_\_\_

E. Have efforts been made to recycle (e.g., excess) waste? Yes

F. Has waste been treated in any manner? \_\_\_\_\_ If so, how? <1 in. of fluid

G. Storage Location: 300 Area Boneyard

H. "I hereby certify that this material has been released by Radiation Monitoring (if applicable) and the  
been completed to the best of my knowledge." Survey Card Number: day of loading

Generator's Signature: R. D. Hensyel

Date: 8-13-84

## II. APPROVAL

A. Approved for disposal by Name: L. F. Lust Phone: 3-4106 Address: 2750 E Co.: RHO

Date: 8-21-84

Signature: L. F. Lust

B. Packaging Requirements (specify): See Disposal Analysis 11-1

C. Disposal Location: See Disposal Analysis 11-1 Chemical Trench, \_\_\_\_\_ Asbestos Trench, \_\_\_\_\_  
(check one) Analysis 11-1 212-P (Storage), \_\_\_\_\_ Other \_\_\_\_\_

## III. TRANSPORTATION/DISPOSAL

A. Transporter(s) Name: Timothy W. Tolberg Phone: 326-8260 Address: 1100 1st St Company: SW

B. Date Transported/Disposed: 8-28-84 DE Felter

C. Transporter(s) Signature: Timothy W. Tolberg

ONSITE DISPOSAL

Instructions for packaging, labeling and marking wastes for onsite disposal:

- Apply the appropriate DOT label, as indicated on page 2 of 2, to the drum.
- Mark the drum with the appropriate ID, as indicated on page 2 of 2.
- Notify Transportation of the appropriate disposal trench for each group of drums:

Item 1 & 2 - Chemical Trench (Corrosive)  
Item 3 - Trash Trench

Items 4 & 5 - Construction Trench

## DISPOSAL ANALYSIS 11-1

HAZARD CLASS	DISPOSAL ITEM NO.	SHIPPING NAME	EPA NO.	DOT ID. NO.	P-T LABEL	NO. OF CONTAINERS	CONTAINER TYPE	QUANTITY Per CONTAINER
Not Regulated*	1	(HN Hydroxylamine)*	N/A	N/A	None	16	55 gal drum	Empty
Corrosive Material	2	Sodium Hydroxide	D002	UN1824	CORROSIVE	4	55 gal drum	Empty
Not Regulated	3	(sand drums)*	N/A	N/A	None	6	55 gal drum	Empty
Not Regulated	4	(oil drums)*	N/A	N/A	None	2	55 gal drum	Empty
Not Regulated	5	(cutting oil drums)*	N/A	N/A	None	4	55 gal drum	Empty

\* Not regulated in amount discarded

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. WA 789 000 8967	Manifest Document No.	2. Page 1 of 1	Information in the shaded areas is not required by Federal law.	
3. Generator's Name and Mailing Address FM Hall 609/600 Area		RHO-11-37		A. State Manifest Document Number NA		
4. Generator's Phone (509) 373-1409				B. State Generator's ID NA		
5. Transporter 1 Company Name Rockwell Hanford		6. US EPA ID Number WA 789 000 8967		C. State Transporter's ID NA		
7. Transporter 2 Company Name NA		8. US EPA ID Number NA		D. Transporter's Phone 6-1420		
9. Designated Facility Name and Site Address Central Landfill Chemical Trench		10. US EPA ID Number WA 789 000 8967		E. State Transporter's ID NA		
				F. Transporter's Phone NA		
				G. State Facility's ID NA		
				H. Facility's Phone 6-6748		
11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)		12. Containers		13. Total Quantity	14. Unit Wt/Vol	15. Waste No.
a. Not Regulated None None		185 DM		Empty	-	None
b. Not Regulated None None		1 DM		50	P	None
c.						
d.						
J. Additional Descriptions for Materials Listed Above				K. Handling Codes for Wastes Listed Above		
15. Special Handling Instructions and Additional Information						
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations.						
Printed/Typed Name D. E. Good		Signature D. E. Good		Date 10/18/84		
17. Transporter 1 Acknowledgement of Receipt of Materials		Signature Earl Flagor		Date 10/30/84		
18. Transporter 2 Acknowledgement of Receipt of Materials		Signature L		Date 10/30/84		
19. Discrepancy Indication Space						
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.						
Printed/Typed Name D E Phelps		Signature D E Phelps		Date 10/30/84		

COC365

# HAZARDOUS WASTE MANIFEST

## THIS SHIPPING ORDER

must be legibly filled in, in ink, in Indelible Pencil, or in Carbon, and retained by the Agent.

MANIFEST DOCUMENT NUMBER

This document refers to  
disposal request  
#PNL-84-017.

PNL-M-83-003

TO: T/S/D FACILITY Rockwell Hanford Operation	FROM: Generator Battelle - PNL
E.P.A. ID Code No. WA7-89-000-8967	E.P.A. ID Code No. WA7-89-000-8967
Address Richland, WA	Address Richland, WA
Destination Central Landfill-chemical trench	Origin 306W/300 Area
Phone Hanan Boynton 373-3516	Phone Jeene Hobbs 376-1631

No Shipping Units	D.O.T. PROPER SHIPPING NAME	HAZARD CLASS	Haz. Mat. I.D. No.	EPA Haz. Waste No.	WEIGHT	LABELS REQUIRED (or Exemption No.)
1	Waste Metal alloy 40% aluminum & 60% Calcium	Water Reactive solid	UN2813	0001	400#	Flammable solid & Dangerous when wet

### PLACARDS REQUIRED

NOTE - Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property. The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding \$ \_\_\_\_\_ Per \_\_\_\_\_

Subject to Section 7 of the conditions, if this shipment is to be delivered to the consignee without receipt on the consignee, the consignee shall sign the following statement:  
The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.

(Signature of Consignee)

FREIGHT CHARGES  
PREPAID COLLECT

☐ ☐

RECEIVED, subject to the classifications and tariffs in effect on the date of the issue of this Bill of Lading, the property described above in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, consigned, and destined as indicated above which said carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed as to each carrier of all or any of, said property over all or any portion of said route to destination and as to each party at any time interested in all or any said property, that every service to be performed hereunder shall be subject to all the bill of lading terms and conditions in the governing classification on the date of shipment. Shipper hereby certifies that he is familiar with all the bill of lading terms and conditions in the governing classification and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

<b>ALTERNATE DESTINATION (EMERGENCY ONLY)</b>	<b>EMERGENCY RESPONSE INFORMATION</b>
T/S/D FACILITY none	CONTACT Name J Single Point Contact
E.P.A. ID Code No. _____	Phone 375-2400
Address _____	National Response Center 1-800-424-8802
Destination _____	in D. C. 426-2675

### CERTIFICATION

This is to certify that the above named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the E.P.A.

Generator Signature Jeene Hobbs *Jeene M Hobbs* Date 9-5-84

TRANSPORTER #1 \_\_\_\_\_ E.P.A. ID No. \_\_\_\_\_  
Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Phone \_\_\_\_\_

Transporter No. 1 This is to certify acceptance of the hazardous waste shipment.  
Signature \_\_\_\_\_ Date \_\_\_\_\_

TRANSPORTER #2 \_\_\_\_\_ E.P.A. ID No. \_\_\_\_\_  
Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Phone \_\_\_\_\_

Transporter No. 2 This is to certify acceptance of the hazardous waste shipment.  
Signature \_\_\_\_\_ Date \_\_\_\_\_

### TREATMENT/STORAGE/DISPOSAL FACILITY

T/S/D FACILITY This is to certify acceptance of the hazardous waste for treatment, storage, or disposal.  
Signature *D E Hobbs* Date 9-5-84

TRANSPORTER #2 COPY

000366 7-BLS-C (6 PL)

# HAZARDOUS WASTE MANIFEST

## THIS SHIPPING ORDER

must be legibly filled in, in ink, in indelible pencil, or in Carbon, and retained by the Agent.

MANIFEST DOCUMENT NUMBER

RHO 10-33 B

TO: T/S/D FACILITY <u>Rockwell Hanford</u>	FROM: Generator <u>Rockwell Hanford</u>
E.P.A. ID Code No. <u>WA 789-000-8967</u>	E.P.A. ID Code No. <u>WA 789000-8967</u>
Address <u>Richland WA</u>	Address <u>Richland WA</u>
Destination <u>Road Trucks &amp; Maint</u>	Origin <u>271 B</u>
Phone <u>Gary Col 373-3629</u>	Phone <u>M J Kelley 373-2242</u>

No Shipping Units	D.O.T. PROPER SHIPPING NAME	HAZARD CLASS	Haz Mat I.D. No.	EPA Haz Waste No.	WEIGHT	LABELS REQUIRED (or Exemption No.)
3	Lubricating Oil	None	None	None		None

### PLACARDS REQUIRED

NOTE - Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property. The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding \$ \_\_\_\_\_ Per \_\_\_\_\_

Subject to Section 2 of the conditions, if this shipment is to be delivered to the consignee without recourse on the carrier, the carrier shall sign the following statement:  
The carrier shall make delivery of this shipment without payment of freight and all other lawful charges.

FREIGHT CHARGES  
PREPAID ☐ COLLECT ☐

(Signature of Consignor)

RECEIVED, subject to the classifications and tariffs in effect on the date of the issue of this Bill of Lading, the property described above in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, consigned, and destined as indicated above which said carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed as to each carrier of all or any of said property over all or any portion of said route to destination and as to each party at any time interested in all or any said property, that every service to be performed hereunder shall be subject to all the bills of lading terms and conditions in the governing classification on the date of shipment. Shipper hereby certifies that he is familiar with all the bill of lading terms and conditions in the governing classification and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

ALTERNATE DESTINATION (EMERGENCY ONLY)	EMERGENCY RESPONSE INFORMATION
T/S/D FACILITY _____	CONTACT Name _____
E.P.A. ID Code No. _____	Phone _____
Address _____	National Response Center 1-800-424-8802
Destination _____	in D. C. 426-2675

### CERTIFICATION

This is to certify that the above named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the E.P.A.

Generator Signature <u>L J Lust</u>	Date <u>11/84</u>
TRANSPORTER #1 <u>Tim Loberg</u>	E.P.A. ID No. <u>81</u>
Address <u>(100) 1171 Bladg</u>	
City <u>Rich WA</u>	State <u>WA</u> Zip <u>99362</u> Phone <u>6-8860</u>

This is to certify acceptance of the hazardous waste shipment.

Transporter No. 1 Signature <u>Timothy Loberg</u>	Date <u>10-11-84</u>
TRANSPORTER #2 _____	E.P.A. ID No. _____
Address _____	
City _____	State _____ Zip _____ Phone _____

This is to certify acceptance of the hazardous waste shipment.

Transporter No. 2 Signature _____	Date _____
-----------------------------------	------------

### TREATMENT/STORAGE/DISPOSAL FACILITY

T/S/D FACILITY Signature <u>D E Photo</u>	Date <u>10-11-1984</u>
---	------------------------

TRANSPORTER #1 COPY

000367

7/8/84 (6-8860)

EPA Form 8700-22 (8-04)

000368

**RADIATION PROTECTION RECORDS**  
**RADIATION SURVEY REPORT**

Swamp of large Swamp Cuckoo & 2 min.  
Swamp 900 ft. Sand-hill 2550 ft.

INSTRUMENT TYPE					RESPIRATORY PROTECTION REQUIRED		
<input type="checkbox"/> EGM	<input type="checkbox"/> LPC	<input checked="" type="checkbox"/> RAM	<input type="checkbox"/> CP	<input type="checkbox"/> SNOOPY	<input type="checkbox"/> SUPPLIED AIR	<input type="checkbox"/> FILTER	<input checked="" type="checkbox"/> NONE
<input checked="" type="checkbox"/> P-11	<input type="checkbox"/>	<input type="checkbox"/> JUNO	<input type="checkbox"/> TPC	<input type="checkbox"/> SCINTRAN			

COMMENTS

[illegible]

BD-7200-066 (1-72) 606369 (OVER)



## HAZARDOUS WASTE MANIFEST

## THIS SHIPPING ORDER

must be legibly filled in, in ink, in indelible pencil, or in Carbon, and retained by the Agent.

MANIFEST DOCUMENT NUMBER

PNL-M-84-005

This document refers to disposal request #PNL-84-007,  
RHO approved disposal request #7-25

TO:	FROM:
T/S/D FACILITY Rockwell Hanford Operations	Generator Battelle - PNL
E.P.A. ID Code No. WA-89-000-8967	E.P.A. ID Code No. WA-89-000-8967
Address Richland, WA	Address Richland, WA
Destination Central Landfill & 2727S	Origin 329 Building/300 Area
Phone Harlan Boynton 373-3516	Phone Jeene Hobbs 376-1631

No. Shipping Units	D.O.T. PROPER SHIPPING NAME	HAZARD CLASS	Haz. Mat. ID No.	EPA Haz. Waste No.	WEIGHT	LABELS REQUIRED (or Exemption No.)
#1	Waste Flammable Liquid Lab Pack	Flammable Liquid			260#	flammable 11
#2	Hazardous Waste N.O.S.	ORM-E			275#	Hazardous waste
#3	Waste Corrosive Liquid labpack	Corrosive material			360#	Corrosive
#4	Waste Flammable Liquid Labpack	Flammable liquid			170#	Flammable 11
NOTE: #1 & #2 go to the Central landfill Chemical Trench: #3 & #4 go to 2727S						

## PLACARDS REQUIRED none

NOTE - Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property. The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding \$ \_\_\_\_\_ Per \_\_\_\_\_

Subject to Section 7 of the conditions, if this shipment is to be delivered to the consignee without recourse on the consignee, the consignee shall sign the following statement:  
The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.

FREIGHT CHARGES  
PREPAID ☐ COLLECT ☐

(Signature of Consignee)

RECEIVED, subject to the classifications and tariffs in effect on the date of the issue of this Bill of Lading, the property described above in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, consigned, and destined as indicated above which said carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed as to each carrier of all or any of, said property over all or any portion of said route to destination and as to each party at any time interested in all or any said property, that every service to be performed hereunder shall be subject to all the bill of lading terms and conditions in the governing classification on the date of shipment. Shipper hereby certifies that he is familiar with all the bill of lading terms and conditions in the governing classification and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

ALTERNATE DESTINATION (EMERGENCY ONLY)	EMERGENCY RESPONSE INFORMATION
T/S/D FACILITY 2727S	CONTACT Name 37 Single Point Contact
E.P.A. ID Code No. _____	Phone 375-2400
Address _____	National Response Center 1-800-424-8802
Destination _____	In D. C. 426-2675

## CERTIFICATION

This is to certify that the above named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the E.P.A.

Generator Signature Jeene Hobbs *Jeene Hobbs* Date \_\_\_\_\_  
 TRANSPORTER #1 *1171* E.P.A. ID No. \_\_\_\_\_  
 Address *Richland*  
 City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Phone \_\_\_\_\_

Transporter No. 1 *1171* This is to certify acceptance of the hazardous waste shipment. *2.3-84*  
 Signature \_\_\_\_\_ Date \_\_\_\_\_

TRANSPORTER #2 \_\_\_\_\_ E.P.A. ID No. \_\_\_\_\_  
 Address \_\_\_\_\_  
 City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Phone \_\_\_\_\_

Transporter No. 2 \_\_\_\_\_ This is to certify acceptance of the hazardous waste shipment.  
 Signature \_\_\_\_\_ Date \_\_\_\_\_

## TREATMENT/STORAGE/DISPOSAL FACILITY

T/S/D FACILITY *2727S* This is to certify acceptance of the hazardous waste for treatment, storage, or disposal.  
 Signature *Jeene Hobbs* Date *2.3-84*

TRANSPORTER #2 COPY 000370

# HAZARDOUS WASTE MANIFEST

## THIS SHIPPING ORDER

must be legibly filled in, in ink, in indelible pencil, or in Carbon, and retained by the Agent.

MANIFEST DOCUMENT NUMBER

PNL-M-84-005

This document refers to disposal request #PNL-84-007  
RHO approved disposal request #7-25

TO: T/S/D FACILITY <u>Rockwell Hanford Operations</u>	FROM: Generator <u>Battelle - PNL</u>
E.P.A. ID Code No. <u>WA-89-000-8967</u>	E.P.A. ID Code No. <u>WA-89-000-8967</u>
Address <u>Richland, WA</u>	Address <u>Richland, WA</u>
Destination <u>Central Landfill &amp; 2727S</u>	Origin <u>329 Building/300 Area</u>
Phone <u>Harlan Boynton 373-3516</u>	Phone <u>Jeene Hobbs 376-1631</u>

No Shipping Units	D.O.T. PROPER SHIPPING NAME	HAZARD CLASS	Haz Mat ID No.	EPA Haz Waste No.	WEIGHT	LABELS REQUIRED (or Exemption No.)
#1	Waste Flammable Liquid Lab Pack	Flammable Liquid			260#	flammable li
#2	Hazardous Waste N.O.S.	ORM-E			275#	Hazardous waste
#3	Waste Corrosive Liquid labpack	Corrosive material			360#	Corrosive
#4	Waste Flammable Liquid Labpack	Flammable liquid			170#	Flammable li
NOTE: #1 & #2 go to the Central Landfill Chemical Trench; #3 & #4 go to 2727S						

PLACARDS REQUIRED none

NOTE - Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property. The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding \$ <u>                    </u> Per <u>                    </u>	Subject to Section 7 of the conditions, if this shipment is to be delivered to the consignee without recourse on the carrier, the carrier shall sign the following statement: The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.  (Signature of Carrier)	FREIGHT CHARGES PREPAID <input type="checkbox"/> COLLECT <input type="checkbox"/>
--	--	--

RECEIVED, subject to the classifications and tariffs in effect on the date of the issue of this Bill of Lading, the property described above in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, consigned, and destined as indicated above which said carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed as to each carrier of all or any of, said property over all or any portion of said route to destination and as to each party at any time interested in all or any said property, that every service to be performed hereunder shall be subject to all the bill of lading terms and conditions in the governing classification on the date of shipment. Shipper hereby certifies that he is familiar with all the bill of lading terms and conditions in the governing classification and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

ALTERNATE DESTINATION (EMERGENCY ONLY)	EMERGENCY RESPONSE INFORMATION
T/S/D FACILITY <u>2727S</u>	CONTACT Name <u>37 Single Point Contact</u>
E.P.A. ID Code No. <u>                    </u>	Phone <u>375-2400</u>
Address <u>                    </u>	National Response Center <u>1-800-424-8802</u>
Destination <u>                    </u>	in D. C. <u>426-2675</u>

### CERTIFICATION

This is to certify that the above named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the E.P.A.

Generator Signature <u>Jeene Hobbs</u>	Date <u>                    </u>
TRANSPORTER #1 <u>Area 1171 Bldg</u>	E.P.A. ID No. <u>                    </u>
Address <u>Richland WA</u>	State <u>WA</u> Zip <u>99352</u> Phone <u>376-1631</u>
City <u>                    </u>	
Transporter No. 1 <u>                    </u>	This is to certify acceptance of the hazardous waste shipment.
Signature <u>                    </u>	Date <u>8-23-84</u>
TRANSPORTER #2 <u>                    </u>	E.P.A. ID No. <u>                    </u>
Address <u>                    </u>	
City <u>                    </u>	State <u>                    </u> Zip <u>                    </u> Phone <u>                    </u>
Transporter No. 2 <u>                    </u>	This is to certify acceptance of the hazardous waste shipment.
Signature <u>                    </u>	Date <u>                    </u>

### TREATMENT/STORAGE/DISPOSAL FACILITY

T/S/D FACILITY <u>                    </u>	This is to certify acceptance of the hazardous waste for treatment, storage, or disposal
Signature <u>                    </u>	Date <u>8-23-84</u>

TRANSMITTED #1 COPY

000371

Rockwell Hanford Operations  
Energy Systems Group  
P.O. Box 800  
Richland, WA 99352



Rockwell  
International

QC: G3 Rnd

In reply, refer to letter R84 3524

Mr. R. D. Hensyel  
Westinghouse Hanford Company  
W/B-79  
Post Office Box 1970  
Richland, Washington 99352

Dear Mr. Hensyel:

DISPOSAL ANALYSIS NO. 11-31

Reference: Chemical Waste Disposal Request, September 20, 1984

The Solid Waste Processing and Disposal Unit (SWP&DU) of Rockwell Hanford Operations has completed analysis of the referenced Chemical Waste Disposal Request.

It has been determined that the waste oil listed on your request is not hazardous waste. This oil may be used for dust control by Rockwell Road, Track and Maintenance. Please contact A. D. Poor (6-1420) for arrangements to transfer the oil to Rockwell.

The empty drums (less than 1 inch of liquid) should be sent to the Central Landfill Chemical Trench. Enclosed is a partially completed Uniform Hazardous Waste Manifest. This manifest must accompany the shipment. Before shipment is made, the generator and a representative of SWP&DU must sign Block 16, "Generator's Certification."

After the shipment is completed, the manifest will be returned to me for distribution of the copies.

Should you require further assistance regarding the disposition of this material please contact me.

Very truly yours,

L. F. Lust, Senior Engineer  
Solid Waste Processing and Disposal Unit

LFL:ra

000372

✓  
Rockwell Hanford Operations  
Energy Systems Group  
P.O. Box 800  
Richland, WA 99352



Rockwell  
International

SEP 03 1984

In reply, refer to letter R84-3523.

Mr. R. D. Hensyel  
Westinghouse Hanford Company  
W/B-79  
Post Office Box 1970  
Richland, Washington 99352

Dear Mr. Hensyel:

DISPOSAL ANALYSIS NO. 11-33

Reference: Chemical Waste Disposal Request, September 20, 1984

The Solid Waste Processing and Disposal Unit (SWP&DU) of Rockwell Hanford Operations has completed analysis of the referenced Chemical Waste Disposal Request.

It has been determined that the empty drums (less than one inch of liquid) listed in this request are not classified as hazardous waste. They should be transported to the Central Landfill Chemical Trench. Enclosed is a partially completed Uniform Hazardous Waste Manifest. This manifest, properly signed by the generator and a representative of SWP&DU in Block 16, must accompany the shipment.

After the shipment is completed, the manifest will be returned to me for distribution of the copies.

Should you require further assistance regarding the disposition of these drums, please contact me.

Very truly yours,

L. F. Lust, Senior Engineer  
Solid Waste Processing and Disposal Unit

LFL:ra

000373

# HAZARDOUS WASTE MANIFEST

## THIS SHIPPING ORDER

must be legibly filled in, in ink, in indelible Pencil, or in Carbon, and retained by the Agent.

MANIFEST DOCUMENT NUMBER

WAC 84-002

TO: T/S/D FACILITY <u>Rockwell Hanford</u>	FROM: Generator <u>Washington Hanford</u>
E.P.A. ID Code No. <u>WA780008967</u>	E.P.A. ID Code No.
Address <u>Richland</u>	Address <u>Richland</u>
Destination <u>Chemical Transfer</u>	Origin <u>300 Area</u>
Phone <u>3-4106</u>	Phone <u>6-3743</u>

No Shipping Units	D.O.T. PROPER SHIPPING NAME	HAZARD CLASS	Haz Mat ID No	EPA Haz Waste No	WEIGHT	LABELS REQUIRED (or Exemption No.)
16	Empty HN drums	Not Regulated	N/A	N/A		Empty
8	Empty Open top drums	Not Regulated	N/A	N/A		Empty
2	Empty oil drums	Not Regulated	N/A	N/A		Empty
4	Empty Cutting oil drums	Not Regulated	N/A	N/A		Empty
3	Empty Sodium Hydroxide	Corrosive	UN 1824	DOO2		Empty Corrosive
10	Empty Paint thinner drums	<del>Flammable</del> Not Regulated	UN 1993	N/A		Empty <del>Flammable</del>

### PLACARDS REQUIRED

NOTE: Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property. The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding \$ \_\_\_\_\_ Per \_\_\_\_\_

Subject to Section F of the conditions, if this shipment is to be delivered to the consignee without recourse on the consignee, the consignor shall sign the following statement:  
The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.  
(Signature of Consignor)

FREIGHT CHARGES  
PREPAID ☐ COLLECT ☐

RECEIVED, subject to the classifications and tariffs in effect on the date of the issue of this Bill of Lading, the property described above in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, consigned, and destined as indicated above which said carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed as to each carrier of all or any of said property over all or any portion of said route to destination and as to each party at any time interested in all or any said property, that every service to be performed hereunder shall be subject to all the bills of lading terms and conditions in the governing classification on the date of shipment. Shipper hereby certifies that he is familiar with all the bills of lading terms and conditions in the governing classification and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

ALTERNATE DESTINATION (EMERGENCY ONLY)		EMERGENCY RESPONSE INFORMATION	
T/S/D FACILITY	CONTACT Name <u>L. LINT</u>	National Response Center 1-800-424-8802	
E.P.A. ID Code No.	Phone <u>373-4106</u>	in D. C. 426-2675	
Address			
Destination			

### CERTIFICATION

This is to certify that the above named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the E.P.A.

Generator Signature <u>R. D. Hensel</u>	Date <u>8-23-84</u>
TRANSPORTER #1 <u>RHO transportation</u>	E.P.A. ID No. <u>WA780008967</u>
Address <u>RHO 1100 Ave</u>	
City <u>Richland</u>	State <u>WA</u> Zip <u>6</u> Phone <u>6654</u>
This is to certify acceptance of the hazardous waste shipment.	
Transporter No. 1 Signature <u>[Signature]</u>	Date <u>8-23-84</u>
TRANSPORTER #2 <u>1120 Pacific 11275th</u>	E.P.A. ID No.
Address <u>R40R 1100 Ave</u>	
City <u>Richland</u>	State <u>WA</u> Zip <u>99552</u> Phone <u>6-8860</u>
This is to certify acceptance of the hazardous waste shipment.	
Transporter No. 2 Signature	Date

### TREATMENT/STORAGE/DISPOSAL FACILITY

T/S/D FACILITY	This is to certify acceptance of the hazardous waste for treatment, storage, or disposal.
Signature <u>[Signature]</u>	Date <u>8-23-84</u>

TRANSPORTER #1 COPY

000374

# Internal Letter

Date August 24, 1984

No . 46720-84-083

TO: (Name, Organization, Internal Address)

G. R. Cox, EA & M  
202S/200-West  
373-3679

FROM: (Name, Organization, Internal Address, Phone)

G. V. Hubbs  
202A/200-East  
373-2323

Subject: Open Request for Disposal of Empty Chemical Containers

- Refs. (a) Letter PS-017-83, May 27, 1983, R. A. Polk to G. R. Cox,  
"Disposal Requirements of Empty Chemical Containers"
- (b) DSI, June 20, 1983, G. R. Cox to R. A. Polk
- (c) Letter, October 19, 1983, R. A. Polk to G. R. Cox,  
same subject

I am requesting a renewal for an open request for empty chemical containers for FY-1985, like the ones we had for FY-1983 and 1984. Enclosed are copies of reference letters and DSI. At this time we do not have any added chemicals to be included on list. We are holding 18 empty drums now and will hold these until we receive a new renewal from you. Thank you for your cooperation in this effort.



G. V. Hubbs, Shift Manager  
PUREX Services

GVH/RLN/cal

cc: W. F. Skiba  
J. D. McIntosh  
LB/file

000375

9 1 1 2 1 1 0 3 9

926006

Complete unstaked parts and forward to: SWP&DU 2750E/200E Rockwell	Rockwell Hanford Operations  <b>CHEMICAL WASTE DISPOSAL REQUEST</b>	Logbook No. 11-24 Manifest(s) cross-reference Manifest(s) cross-reference
Requested by G. V. Hubbs	Telephone Number 373-2323	Address 202A/200 East
Company Rockwell		
Signature _____ Date <u>11/1/84 to 10/1/85</u>		

WASTE DESCRIPTION (If more than 12 items, continue on the back of this form)

Item No.	*** No. of Containers	Container Volume	Waste Volume	Container	Chemical or Trade Name	Solid(S) Liquid(L) Gas(G)	Hazards*	Status**	Disposition and Date
1	1	300 ft <sup>3</sup>	300 ft <sup>3</sup>	Dumpster	Empty containers	S	0	MT	
					Sodium Nitrate, Sodium Nitrite,				
					Sulfamic Acid, Calcium Nitrate,				
					Oxalic Acid and potassium permanganate				

Radiation Monitoring Release Survey Card Number (if applicable)

- |  |  |   |
|--|--|---|
| * Hazards<br>Corrosive - C    Flammable - F<br>Oxidizer - O    Explosive - E<br>Poison - P | ** Status<br>Full - F            New (unused) - N<br>Partially Full - PF<br>Empty (< 1 in 1,000) | *** Indicate how many<br>containers of this<br>size are being offered |
|--|--|---|

DISPOSAL ANALYSIS NO. 11-29

ITEM NO.	CONTAINER NO.	DOT SHIPPING NAME	DOT HAZARD CLASS	DOT IDENTIFICATION NUMBER	DOT LABEL	EPA NUMBER	NO. OF CONTAINERS	TYPE OF CONTAINER	QUANTITY PER CONTAINER
-------------	------------------	-------------------------	------------------------	---------------------------------	--------------	---------------	----------------------	----------------------	------------------------------

OFFSITE DISPOSALONSITE DISPOSAL

Sodium Nitrate	Oxidizer	UN1498	N/A	None
Sodium Nitrite	Oxidizer	UN1500	N/A	None
Corrosive Solid, HOS (Sulfamic Acid)	Corrosive Material	UN1759	N/A	D002
Calcium Nitrate	Oxidizer	UN1454	N/A	None
None (Oxalic Acid)	None	None	N/A	None
Potassium Permanganate	Oxidizer	UN1490	N/A	None

000377



<b>UNIFORM HAZARDOUS WASTE MANIFEST</b>				1. Generator's US EPA ID No. <b>WA 789 000 8967</b>		Manifest Document No.		2. Page 1 of <b>2</b>		Information in the shaded areas is not required by Federal law.					
3. Generator's Name and Mailing Address <b>DF Bravard RHO-9-19B</b> <b>2704 W/200 West</b>								A. State Manifest Document Number							
4. Generator's Phone ( <b>509</b> ) <b>373-3326</b>								B. State Generator's ID							
5. Transporter 1 Company Name <b>Rockwell Hanford</b>				6. US EPA ID Number <b>WA 789 000 8967</b>				C. State Transporter's ID							
7. Transporter 2 Company Name <b>NA</b>				8. US EPA ID Number <b>NA</b>				D. Transporter's Phone <b>6-1420</b>							
9. Designated Facility Name and Site Address <b>Chemical Trench</b> <b>Central Landfill</b>								10. US EPA ID Number <b>WA 789 000 8967</b>							
								E. State Transporter's ID							
								F. Transporter's Phone							
								G. State Facility's ID							
								H. Facility's Phone <b>6-6748</b>							
11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)								12. Containers		13. Total Quantity		14. Unit Wt/Vol		15. Waste No.	
								No. Type							
a. <b>1 through 14</b> <b>None</b> <b>None</b> <b>None</b>								<b>14 DM</b>		<b>0 (Empty)</b>		<b>-</b>		<b>None</b>	
b. <b>15</b> <b>Methyl Ethyl Ketone</b> <b>Flammable Liquid</b> <b>UN 1193</b>								<b>3 DM</b>		<b>0 (Empty)</b>		<b>-</b>		<b>D001</b>	
c. <b>25</b> <b>Flammable Liquid NOS</b> <b>Flammable Liquid</b> <b>UN 1993</b>								<b>1 DM</b>		<b>0 (Empty)</b>		<b>-</b>		<b>D001</b>	
d. <b>26</b> <b>Corrosive Liquid, NOS</b> <b>Corrosive</b> <b>UN 1760</b>								<b>1 DM</b>		<b>0 (Empty)</b>		<b>-</b>		<b>D002</b>	
J. Additional Descriptions for Materials Listed Above								K. Handling Codes for Wastes Listed Above							
15. Special Handling Instructions and Additional Information															
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations.															
Printed/Typed Name <b>D.F. BRAVARD</b>								Signature <i>D.F. Bravard</i>		Inspected <i>J. Lunt</i>		Date <b>11/14/94</b>		Month Day Year	
17. Transporter 1 Acknowledgement of Receipt of Materials								Signature <i>J.A. Aldridge</i>		Date <b>11/26/94</b>		Month Day Year			
18. Transporter 2 Acknowledgement of Receipt of Materials								Signature		Date		Month Day Year			
19. Discrepancy Indication Space															
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.															
Printed/Typed Name <b>MER Hamilton</b>								Signature <i>Mer Hamilton</i>		Date <b>11/26/94</b>		Month Day Year			

000378

<b>UNIFORM HAZARDOUS WASTE MANIFEST</b> (Continuation Sheet)		21. Generator's US EPA ID No. <u>WA 789 000 8967</u>	Manifest Document No.	22. Page <u>2 of 2</u>	Information in the shaded areas is not required by Federal law.		
23. Generator's Name <u>DF Bravard</u> <u>2704 W/200 West</u>			25. US EPA ID Number <u>RHD-9-19B</u>		L. State Manifest Document Number		
24. Transporter Company Name <u>Rockwell Hanford</u>			25. US EPA ID Number <u>WA 789 000 8967</u>		M. State Generator's ID		
26. Transporter Company Name <u>NA</u>			27. US EPA ID Number <u>NA</u>		N. State Transporter's ID		
					O. Transporter's Phone <u>6-1420</u>		
					P. State Transporter's ID		
					Q. Transporter's Phone		
28. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)				29. Containers	30. Total Quantity	31. Unit Wt/Vol	R. Waste No.
				No.	Type		
a.	<u>24 Ethylene Glycol</u>			<u>1</u>	<u>DM</u>	<u>2</u>	<u>G None</u>
b.	<u><del>West power detergent</del></u>			<u>1</u>	<u>DM (Empty)</u>	<u>0</u>	<u>= None</u>
c.							
d.							
e.							
f.							
g.							
h.							
i.							
S. Additional Descriptions for Materials Listed Above				T. Handling Codes for Wastes Listed Above			
32. Special Handling Instructions and Additional Information							
33. Transporter Acknowledgement of Receipt of Materials						Date	
Printed/Typed Name <u>J. A. Aldridge</u>				Signature <u>J. A. Aldridge</u>		Month Day Year <u>11 26 84</u>	
34. Transporter Acknowledgement of Receipt of Materials						Date	
Printed/Typed Name				Signature		Month Day Year	
35. Discrepancy Indication Space							

<b>UNIFORM HAZARDOUS WASTE MANIFEST</b>		1. Generator's US EPA ID No. <b>WA 789 000 8967</b>		Manifest Document No.		2. Page 1 of 1		Information in the shaded areas is not required by Federal law.	
		3. Generator's Name and Mailing Address <b>RL Nelson 202A / 200 East</b>		<b>RHO 13-5</b>		A. State Manifest Document Number			
4. Generator's Phone ( <b>509</b> ) <b>373-2323</b>		5. Transporter 1 Company Name <b>Rociswell Hartford</b>		6. US EPA ID Number <b>WA 789 000 8967</b>		C. State Transporter's ID		D. Transporter's Phone <b>376-1420</b>	
7. Transporter 2 Company Name		8. US EPA ID Number		E. State Transporter's ID		F. Transporter's Phone			
9. Designated Facility Name and Site Address <b>Chemical Landfill Oxid</b>		10. US EPA ID Number <b>WA 789 000 8967</b>		G. State Facility's ID		H. Facility's Phone <b>(509) 376-6748</b>			
11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)				12. Containers		13. Total		14. Unit	
				No. Type		Quantity		Wt/Vol	
a. <b>Waste</b> <b>Potassium Permanganate Oxidizer UN1490</b>				<b>5 DM</b>		<b>13</b>		<b>3 ft</b> <b>D002</b>	
b. <b>Waste Empty Drums</b> <b>Non regulated Ferrous sulfate and hydrotol amine nitrate</b>				<b>10 DP</b>		<b>73</b>		<b>3 ft</b> <b>None</b>	
c.									
d.									
J. Additional Descriptions for Materials Listed Above						K. Handling Codes for Wastes Listed Above			
15. Special Handling Instructions and Additional Information									
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations.									
Printed/Typed Name <b>RONALD L. NELSON</b>						Signature <i>Ronald L. Nelson</i>		Date <b>12/4/84</b>	
17. Transporter 1 Acknowledgement of Receipt of Materials						Signature <i>Timothy W. Toberg</i>		Date <b>12/4/84</b>	
18. Transporter 2 Acknowledgement of Receipt of Materials						Signature		Date	
19. Discrepancy Indication Space									
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.									
Printed/Typed Name <b>D E Phelps</b>						Signature <i>D E Phelps</i>		Date <b>12/4/84</b>	

000200

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. WA 789 000 8967		Manifest Document No.		2. Page 1 of 1		Information in the shaded areas is not required by Federal law.	
3. Generator's Name and Mailing Address KH Smith 105N/100 N 373-4940						A. State Manifest Document Number UNK-12-15B			
4. Generator's Phone (509) 373-4940						B. State Generator's ID			
5. Transporter 1 Company Name Rockwell Hanford						6. US EPA ID Number WA 789 000 8967		C. State Transporter's ID	
7. Transporter 2 Company Name NA						8. US EPA ID Number NA		D. Transporter's Phone 376-1420	
9. Designated Facility Name and Site Address Central Landfill Chemical Trench						10. US EPA ID Number WA 789 000 8967		E. State Transporter's ID	
								F. Transporter's Phone	
								G. State Facility's ID	
								H. Facility's Phone 509-376-6748	
11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)						12. Containers		13. Total Quantity	
						No. Type		14. Unit Wt/Vol	
								1. Waste No.	
a. B Oxidizer, Corrosive solid, NOS						Oxidizer & Corrosive NA 9194		1 DM 4 3	
b. C Flammable Liquid, NOS						Flammable Liquid UN 1993		1 DM 4 3	
c. D Oxidizer, Corrosive solid, NOS						Oxidizer & Corrosive NA 9194		1 DM 4 3	
d.									
J. Additional Descriptions for Materials Listed Above Labpacks containing glass and metal containers, packed in vermiculite.						K. Handling Codes for Wastes Listed Above			
15. Special Handling Instructions and Additional Information									
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations.									
Printed/Typed Name JOEL COOPER						Signature [Signature]		Inspected by L. J. Hunt 11/29/84	
								Date Month Day Year 11 29 84	
17. Transporter 1 Acknowledgement of Receipt of Materials								Date	
Printed/Typed Name R.C. HAWKS						Signature		Month Day Year 12 15 84	
18. Transporter 2 Acknowledgement of Receipt of Materials								Date	
Printed/Typed Name ROBERT CHAMBERS						Signature [Signature]		Month Day Year 12 15 84	
19. Discrepancy Indication Space									
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.						Date			
Printed/Typed Name D.E. Phelps						Signature [Signature]		Month Day Year 12 15 84	

000381

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. WA 789 000 8967	Manifest Document No. RHO 13-9	2. Page 1 of 1	Information in the shaded areas is not required by Federal law.	
3. Generator's Name and Mailing Address R L Nelson 202A/200 East				A. State Manifest Document Number		
4. Generator's Phone (509 ) 373-2323				B. State Generator's ID		
5. Transporter 1 Company Name Rockwell Hanford		6. US EPA ID Number WA 789 000 8967		C. State Transporter's ID		
7. Transporter 2 Company Name N/A		8. US EPA ID Number N/A		D. Transporter's Phone 376-1420		
9. Designated Facility Name and Site Address Central Landfill Chemical Trench		10. US EPA ID Number WA 789 000 8967		E. State Transporter's ID		
				F. Transporter's Phone		
				G. State Facility's ID		
				H. Facility's Phone (509) 373-6748		
11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)		12. Containers		13. Total Quantity	14. Unit Wt/Vol	15. Waste No.
a. Waste Potassium Permanganate, Oxidizer UN1490		26 DM		13	Ft <sup>3</sup>	D002
b. Waste Empty Drums, Non-regulated (ferrous sulfamate, hydroxylamine nitrate)		14 DP		102	Ft <sup>3</sup>	None
c.						
d.						
J. Additional Descriptions for Materials Listed Above				K. Handling Codes for Wastes Listed Above		
15. Special Handling Instructions and Additional Information						
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations.						
Printed/Typed Name RONALD L. NELSON		Signature Ronald Nelson		Date 12/11/84		
17. Transporter 1 Acknowledgement of Receipt of Materials		Signature Timothy W Toberg		Date 12/12/84		
18. Transporter 2 Acknowledgement of Receipt of Materials		Signature		Date		
Printed/Typed Name		Signature		Date		
19. Discrepancy Indication Space						
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.						
Printed/Typed Name D E Phelps		Signature D E Phelps		Date 12/12/84		

000382

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. WA 789 000 8967	Manifest Document No.	2. Page 1 of 1	Information in the shaded areas is not required by Federal law.	
3. Generator's Name and Mailing Address R L Nelson 202A/200 East			RHO 13-9		A. State Manifest Document Number	
4. Generator's Phone (509) 373-2323					B. State Generator's ID	
5. Transporter 1 Company Name Rockwell Hanford			6. US EPA ID Number WA 789 000 8967		C. State Transporter's ID	
7. Transporter 2 Company Name N/A			8. US EPA ID Number N/A		D. Transporter's Phone 376-1420	
9. Designated Facility Name and Site Address Central Landfill Chemical Trench			10. US EPA ID Number WA 789 000 8967		E. State Transporter's ID	
					F. Transporter's Phone	
					G. State Facility's ID	
					H. Facility's Phone (509) 373-6748	
11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)			12. Containers		13. Total Quantity	14. Unit Wt/Vol
			No.	Type		
a.	Waste Potassium Permanganate Oxidizer UN1490		5	DM	13	Ft <sup>3</sup>
b.	Waste Empty Drums, Non-regulated (ferrous sulfate, hydroxylamine nitrate)		14	DP	102	Ft <sup>3</sup>
c.						
d.						
J. Additional Descriptions for Materials Listed Above				K. Handling Codes for Wastes Listed Above		
15. Special Handling Instructions and Additional Information						
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations.						
Printed/Typed Name			Signature			Date
						Month Day Year
17. Transporter 1 Acknowledgement of Receipt of Materials						Date
Printed/Typed Name			Signature			Month Day Year
18. Transporter 2 Acknowledgement of Receipt of Materials						Date
Printed/Typed Name			Signature			Month Day Year
19. Discrepancy Indication Space						
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.						
Printed/Typed Name			Signature			Date
						Month Day Year

000383

<b>UNIFORM HAZARDOUS WASTE MANIFEST</b>		1. Generator's US EPA ID No. <b>WA 789 000 8967</b>		Manifest Document No.		2. Page 1 of 1		Information in the shaded areas is not required by Federal law.			
3. Generator's Name and Mailing Address <b>RE Wickersham RHO 10-23 272-E/200 East</b>						A. State Manifest Document Number					
						B. State Generator's ID					
4. Generator's Phone <b>(509) 373-4074</b>						C. State Transporter's ID					
5. Transporter 1 Company Name <b>Rockwell Hanford</b>						6. US EPA ID Number <b>WA 789 000 8967</b>				D. Transporter's Phone <b>376-1420</b>	
7. Transporter 2 Company Name						8. US EPA ID Number				E. State Transporter's ID	
9. Designated Facility Name and Site Address <b>Central Landfill Corrosive Trench</b>						10. US EPA ID Number <b>WA 789 000 8967</b>				F. Transporter's Phone	
						G. State Facility's ID					
						H. Facility's Phone <b>(509) 376-6748</b>					
11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)						12. Containers		13. Total Quantity		14. Unit Wt/Vol	15. Waste No.
						No.	Type				
a. <b>Waste Flammable Liquid Corrosive</b>						<b>Flammable Liquid UN2920</b>		<b>1 DM 0.7</b>		<b>R3</b>	<b>D002 U154</b>
b.											<b>D001</b>
c.											
d.											
J. Additional Descriptions for Materials Listed Above <b>Steel paint bucket w/ glass inside containers</b>						K. Handling Codes for Wastes Listed Above					
15. Special Handling Instructions and Additional Information											
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations.											
Printed/Typed Name <b>X RW E Wickersham</b>						Signature <i>[Signature]</i>			Date <b>12/19/84</b>		
17. Transporter 1 Acknowledgement of Receipt of Materials						Signature <i>[Signature]</i>			Date <b>12/20/84</b>		
Printed/Typed Name <b>JOHN H. ARMSTRONG</b>						Signature <i>[Signature]</i>			Date <b>12/20/84</b>		
18. Transporter 2 Acknowledgement of Receipt of Materials						Signature			Date		
Printed/Typed Name						Signature			Date		
19. Discrepancy Indication Space											
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.											
Printed/Typed Name <b>JO E PHILIPS</b>						Signature <i>[Signature]</i>			Date <b>12/20/84</b>		

<b>UNIFORM HAZARDOUS WASTE MANIFEST</b>		1. Generator's US EPA ID No. <b>WA 789 000 8967</b>		Manifest Document No.		2. Page 1 of 1		Information in the shaded areas is not required by Federal law.					
3. Generator's Name and Mailing Address <b>HA Clark 2712 - E / 200 East RHO 13-7</b>						A. State Manifest Document Number							
4. Generator's Phone (509) <b>373-2319</b>						B. State Generator's ID							
5. Transporter 1 Company Name <b>Rockwell Hanford</b>						C. State Transporter's ID							
6. US EPA ID Number <b>WA 789 000 8967</b>						D. Transporter's Phone <b>376-1420</b>							
7. Transporter 2 Company Name <b>NA</b>						E. State Transporter's ID							
8. US EPA ID Number <b>NA</b>						F. Transporter's Phone							
9. Designated Facility Name and Site Address <b>Central Landfill Chemical Trench</b>						G. State Facility's ID							
10. US EPA ID Number <b>WA 789 000 8967</b>						H. Facility's Phone <b>(509) 376-6748</b>							
11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)						12. Containers		13. Total Quantity		14. Unit Wt/Vol		15. Waste No.	
						No. Type							
a. <b>Non-Regulated Empty drums</b> <b>None</b> <b>None</b>						<b>66 DM</b>		<b>482</b>		<b>FL<sup>3</sup></b>		<b>None</b>	
b. <b>Non-Regulated Empty drums</b> <b>None</b> <b>None</b>						<b>4 DF</b>		<b>29</b>		<b>FL<sup>3</sup></b>		<b>None</b>	
c.													
d.													
J. Additional Descriptions for Materials Listed Above <b>66 Metal drums, 4 Fiber Drums Total Volume 511 FL<sup>3</sup></b>						K. Handling Codes for Wastes Listed Above							
15. Special Handling Instructions and Additional Information													
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations.													
Printed/Typed Name <b>H.A. Clark</b>						Signature <b>H.A. Clark</b>		Approved by <b>L.J. Lust</b>		Date Month Day Year <b>12 14 84</b>			
17. Transporter 1 Acknowledgement of Receipt of Materials						Printed/Typed Name <b>JO THOMAS</b>		Signature <b>JO THOMAS</b>		Date Month Day Year <b>3 7 85</b>			
18. Transporter 2 Acknowledgement of Receipt of Materials						Printed/Typed Name		Signature		Date Month Day Year			
19. Discrepancy Indication Space													
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.										Date Month Day Year <b>12 14 84</b>			
Printed/Typed Name <b>H.A. Clark</b>						Signature <b>H.A. Clark</b>							



UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. WA 789 000 8967		Manifest Document No.		2. Page 1 of 1		Information in the shaded areas is not required by Federal law.					
3. Generator's Name and Mailing Address R L Nelson 102A/200E 373-3323						A. State Manifest Document Number RH0 13-13							
4. Generator's Phone (509) 373-3323						B. State Generator's ID							
5. Transporter 1 Company Name Rockwell Hanford						C. State Transporter's ID							
6. US EPA ID Number WA 789 000 8967						D. Transporter's Phone 376-1420							
7. Transporter 2 Company Name NA						E. State Transporter's ID							
8. US EPA ID Number NA						F. Transporter's Phone							
9. Designated Facility Name and Site Address Central Landfill Corrosive Trench						G. State Facility's ID							
10. US EPA ID Number WA 789 000 8967						H. Facility's Phone (509) 376-6748							
11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)						12. Containers		13. Total Quantity		14. Unit Wt/Vol		15. Waste No.	
a. Waste Empty Non-Regulated Drums (Perovous sulfamate and hydroxylamine nitrate) None None						15 1/2 DM		117		ft <sup>3</sup>		None	
b.													
c.													
d.													
J. Additional Descriptions for Materials Listed Above						K. Handling Codes for Wastes Listed Above							
15. Special Handling Instructions and Additional Information													
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations.													
Printed/Typed Name RONALD L. NELSON						Signature Ronald L. Nelson		Approved by S J Luet		Date Month Day Year 12 12 84			
17. Transporter 1 Acknowledgement of Receipt of Materials						Signature Timothy W Toburg		Date Month Day Year 12 20 84					
18. Transporter 2 Acknowledgement of Receipt of Materials						Signature		Date Month Day Year					
19. Discrepancy Indication Space													
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.						Date Month Day Year 12 20 84							
Printed/Typed Name D E Phelps						Signature D E Phelps		Date Month Day Year 12 20 84					

# HAZARDOUS WASTE MANIFEST

## THIS SHIPPING ORDER

must be legibly filled in, in ink, in indelible pencil, or in Carbon, and retained by the Agent.

MANIFEST DOCUMENT NUMBER

This document refers  
to disposal request  
#PNL-83-025

PNL-M-83-009

TO: T/S/D FACILITY Rockwell Hanford Operation	FROM: Generator Battelle - PNL
E.P.A. ID Code No. WA-89-000-8967	E.P.A. ID Code No. WA-89-000-8967
Address Richland, WA 99352	Address Richland, WA 99352
Destination Central landfill - chemical trench	Origin JA Jones lot/3000 Area
Phone Harlan Roynton 373-3516	Phone Jeene Hobbs 376-1631

No Shipping Units	D.O.T. PROPER SHIPPING NAME	HAZARD CLASS	Haz Mat ID No	EPA Haz Waste No	WEIGHT	LABELS REQUIRED (or Exemption No.)
39	FRIT 200 MESH Anhydrous borax	UNregulated Unregulated			55 gal	
3	Sodium nitrate	oxidizer	UN 1498	D003	55 gal	oxidizer
3	Waste sodium nitrate	oxidizer	UN 1498	D003	30 gal	oxidizer
2	Waste corrosive solids n.o.s. (boric acid)	corrosive mat.	UN 1759	D002	55 gal	corrosive
2	Waste corrosive solids n.o.s. (boric acid)	corrosive mat	UN 1759	D002	30 gal	corrosive
8	Waste sodium nitrite	oxidizer	UN 1500	D003	30 gal	oxidizer

### PLACARDS REQUIRED

NOTE - Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property. The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding \$ _____ Per _____	Subject to Section 7 of the conditions, if this shipment is to be delivered to the consignee without recourse on the consignee, the consignor shall sign the following statement: The consignor shall not make delivery of this shipment without payment of freight and all other lawful charges.	FREIGHT CHARGES PREPAID <input type="checkbox"/> COLLECT <input type="checkbox"/>
	(Signature of Consignor)	

RECEIVED, subject to the classifications and tariffs in effect on the date of the issue of this Bill of Lading, the property described above in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, consigned, and destined as indicated above which said carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed as to each carrier of all or any of, said property over all or any portion of said route to destination and as to each party at any time interested in all or any said property, that every service to be performed hereunder shall be subject to all the bill of lading terms and conditions in the governing classification on the date of shipment. Shipper hereby certifies that he is familiar with all the bill of lading terms and conditions in the governing classification and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

ALTERNATE DESTINATION (EMERGENCY ONLY)	EMERGENCY RESPONSE INFORMATION
T/S/D FACILITY none	CONTACT Name Jeene Hobbs
E.P.A. ID Code No.	Phone 376-1631
Address	National Response Center 1-800-424-8802
Destination	in D. C. 426-2675

### CERTIFICATION

This is to certify that the above named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the E.P.A.

Generator Signature Jeene Hobbs Date \_\_\_\_\_

TRANSPORTER #1 \_\_\_\_\_ E.P.A. ID No. \_\_\_\_\_  
Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Phone \_\_\_\_\_

This is to certify acceptance of the hazardous waste shipment.

Transporter No. 1 Signature \_\_\_\_\_ Date \_\_\_\_\_

TRANSPORTER #2 \_\_\_\_\_ E.P.A. ID No. \_\_\_\_\_  
Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Phone \_\_\_\_\_

This is to certify acceptance of the hazardous waste shipment.

Transporter No. 2 Signature \_\_\_\_\_ Date \_\_\_\_\_

### TREATMENT/STORAGE/DISPOSAL FACILITY

This is to certify acceptance of the hazardous waste for treatment, storage, or disposal.

T/S/D FACILITY Signature P.E. Phelps Chemical Trench Date 8-9-84

TRANSPORTED 44 CARDS

000287

# HAZARDOUS WASTE MANIFEST

## THIS SHIPPING ORDER

must be legibly filled in, in ink, in indelible pencil, or in carbon, and retained by the Agent.

MANIFEST DOCUMENT NUMBER

PNL-M-83-009 page 2

TO: T/S/D FACILITY <u>Rockwell Hanford Operations</u>	FROM: Generator <u>Battelle - PNL</u>
E.P.A. ID Code No. <u>WA-89-000-8967</u>	E.P.A. ID Code No. <u>WA-89-000-8967</u>
Address <u>Richland, WA 99352</u>	Address <u>Richland, WA 99352</u>
Destination <u>Central Landfill - chemical trench</u>	Origin <u>JA Jones lot/ 3000 Area</u>
Phone <u>Harlan Boynton 373-3516</u>	Phone <u>Jeene Hobbs 376-1631</u>

No Shipping Units	D.O.T. PROPER SHIPPING NAME	HAZARD CLASS	Haz Mat I.D. No.	EPA Haz Waste No.	WEIGHT	LABELS REQUIRED (or Exemption No.)
1	Waste sodium nitrite mixture	oxidizer	UN 1500	D003	55 gal	oxidizer
4	Waste corrosive solids n.o.s. (boric acid, frit, soda ash, silica & sweepings)	corrosive mat.	UN 1759	D002	55 gal	corrosive
\$4	Waste corrosive solids n.o.s. (boric acid, anhydrous, and brown sand)	corrosive mat	UN1759	D002	30 gal	corrosive
1	Waste corrosive solids n.o.s. mix (boric acid, borax, & KNO <sub>3</sub> )	corrosive mat	UN 1759	D002	55 gal	corrosive
4	Waste sodium nitrate mixture (boric acid, sand, frit, borax, & sodium nitrate)	oxidizer	UN 1498	D003	30 gal	oxidizer
4	Borax, sand, frit, & MT bags	Unregulated				

PLACARDS REQUIRED <u>7 PLASTIC DRUMS 55 gal - Sodium Nitrite Sludge</u>	NOTE - Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property. The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding \$ _____ Per _____	Freight Charges PREPAID <input type="checkbox"/> COLLECT <input type="checkbox"/>
---	--	--

RECEIVED, subject to the classifications and tariffs in effect on the date of the issue of this Bill of Lading, the property described above in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, consigned, and destined as indicated above which said carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed as to each carrier of all or any of said property over all or any portion of said route to destination and as to each party at any time interested in all or any said property, that every service to be performed hereunder shall be subject to all the bill of lading terms and conditions in the governing classification on the date of shipment. Shipper hereby certifies that he is familiar with all the bill of lading terms and conditions in the governing classification and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

ALTERNATE DESTINATION (EMERGENCY ONLY)	EMERGENCY RESPONSE INFORMATION
T/S/D FACILITY <u>none</u>	CONTACT Name <u>Jeene Hobbs</u>
E.P.A. ID Code No. _____	Phone <u>376-1631</u>
Address _____	National Response Center 1-800-424-8802
Destination _____	in D. C. 426-2675

**CERTIFICATION**  
This is to certify that the above named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the E.P.A.

Generator Signature Jeene Hobbs Date \_\_\_\_\_

TRANSPORTER #1 James H. Hays E.P.A. ID No. \_\_\_\_\_  
Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Phone \_\_\_\_\_

This is to certify acceptance of the hazardous waste shipment.  
Transporter No. 1 Signature \_\_\_\_\_ Date \_\_\_\_\_

TRANSPORTER #2 \_\_\_\_\_ E.P.A. ID No. \_\_\_\_\_  
Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Phone \_\_\_\_\_

This is to certify acceptance of the hazardous waste shipment.  
Transporter No. 2 Signature \_\_\_\_\_ Date \_\_\_\_\_

## TREATMENT/STORAGE/DISPOSAL FACILITY

This is to certify acceptance of the hazardous waste for treatment, storage, or disposal.  
T/S/D FACILITY Signature E. P. Phelps Chemical Trench Date 2-9-84

TRANSPORTED #1 COPY 000388

# HAZARDOUS WASTE MANIFEST

## THIS SHIPPING ORDER

must be legibly filled in, in ink, in indelible pencil, or in Carbon, and retained by the Agent.

MANIFEST DOCUMENT NUMBER

RHO-11-23

TO:	FROM:
T/S/D FACILITY <u>Rockwell Hanford</u>	Generator <u>Rockwell Hanford</u>
E.P.A. ID Code No. <u>WA 789-000-8967</u>	E.P.A. ID Code No. <u>WA 789-000-8967</u>
Address <u>Richland WA</u>	Address <u>2707 W</u>
Destination <u>Chemical Trench</u>	Origin
Phone <u>L. E. Lust 373-4802</u>	Phone <u>L. Guerra 3-2351</u>

No Shipping Units	D.O.T. PROPER SHIPPING NAME	HAZARD CLASS	Har. Mat. I.D. No.	EPA Haz Waste No.	WEIGHT	LABELS REQUIRED (or Exemption No.)
36	Fenamine (Empty, triple rinsed)	ORM-A	NA3765	U232		NONE
1	Dry waste - triple bagged	ORM-A	NA3765	U232		NONE

### PLACARDS REQUIRED

NOTE - Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property. The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding \$ \_\_\_\_\_ Per \_\_\_\_\_

Subject to Section 7 of the conditions, if this statement is to be delivered to the consignee without recourse on the consignor, the consignor shall sign the following statement.

The carrier shall not make delivery of the shipment without payment of freight and all other lawful charges.

(Signature of Consignor)

### FREIGHT CHARGES

PREPAID ☐ COLLECT ☐

RECEIVED, subject to the classifications and tariffs in effect on the date of the issue of this Bill of Lading, the property described above in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, consigned, and destined as indicated above which said carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed as to each carrier of all or any of, said property over all or any portion of said route to destination and as to each party at any time interested in all or any said property, that every service to be performed hereunder shall be subject to all the bill of lading terms and conditions in the governing classification on the date of shipment. Shipper hereby certifies that he is familiar with all the bill of lading terms and conditions in the governing classification and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

ALTERNATE DESTINATION (EMERGENCY ONLY)	EMERGENCY RESPONSE INFORMATION
T/S/D FACILITY <u>N/A</u>	CONTACT Name <u>GR Co</u>
E.P.A. ID Code No. _____	Phone <u>373-3679</u>
Address _____	National Response Center <u>1-800-424-8802</u>
Destination _____	in D. C. <u>426-2675</u>

### CERTIFICATION

This is to certify that the above named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the E.P.A.

Generator Signature L. Guerra, L. E. Lust 9/6/84 Date \_\_\_\_\_

TRANSPORTER #1 WALTER I SAUNDERS E.P.A. ID No. WA-789-000-8967  
 Address 2707 W 200 WEST  
 City Richland State WA Zip \_\_\_\_\_ Phone 3-2351

Transporter No. 1 Signature Walter Saunders This is to certify acceptance of the hazardous waste shipment. Date 9-13-84

TRANSPORTER #2 \_\_\_\_\_ E.P.A. ID No. \_\_\_\_\_  
 Address \_\_\_\_\_  
 City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Phone \_\_\_\_\_

Transporter No. 2 Signature \_\_\_\_\_ This is to certify acceptance of the hazardous waste shipment. Date \_\_\_\_\_

### TREATMENT/STORAGE/DISPOSAL FACILITY

T/S/D FACILITY Signature D E Phelps This is to certify acceptance of the hazardous waste for treatment, storage, or disposal. Date 9-13-1984

TRANSPORTER #1 CDV

0008

LABELS 6-16 PLY

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. WA-789-000-8967		Manifest Document No. WMC-11-31		2. Page 1 of 1		Information in the shaded areas is not required by Federal law.					
3. Generator's Name and Mailing Address RD Hensyel WIB-79 WMC (504) 376-3743						A. State Manifest Document Number NA							
4. Generator's Phone ( ) WMC (504) 376-3743						B. State Generator's ID NA							
5. Transporter 1 Company Name Rockwell Hanford						C. State Transporter's ID NA							
6. US EPA ID Number WA-789-000-8967						D. Transporter's Phone 376-1420							
7. Transporter 2 Company Name NA						E. State Transporter's ID NA							
8. US EPA ID Number NA						F. Transporter's Phone NA							
9. Designated Facility Name and Site Address Central Landfill Chemical Trench						G. State Facility's ID NA							
10. US EPA ID Number WA-789-000-8967						H. Facility's Phone 6-6748							
11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)						12. Containers		13. Total Quantity		14. Unit Wt/Vol		15. Waste No.	
a. Oil, nos. Combustible Liquid NA1270						34 DM		Empty				None	
b.													
c.													
d.													
J. Additional Descriptions for Materials Listed Above						K. Handling Codes for Wastes Listed Above							
15. Special Handling Instructions and Additional Information													
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations.													
Printed/Typed Name RD Hensyel						Signature RD Hensyel						Date Month Day Year 10 11 84	
17. Transporter 1 Acknowledgement of Receipt of Materials						Signature L. P. H.						Date Month Day Year 10 11 84	
Printed/Typed Name LARRY D. PADILLA						Signature L. P. H.						Date Month Day Year 10 11 84	
18. Transporter 2 Acknowledgement of Receipt of Materials						Signature						Date Month Day Year	
Printed/Typed Name						Signature						Date Month Day Year	
19. Discrepancy Indication Space													
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.													
Printed/Typed Name						Signature						Date Month Day Year	

000290

# HAZARDOUS WASTE MANIFEST

**THIS SHIPPING ORDER**

must be legibly filled in, in ink, in indelible pencil, or in Carbon, and retained by the Agent.

MANIFEST DOCUMENT NUMBER

PNL-M-83-008 page 2

TO: T/S/D FACILITY <u>Rockwell Hanford</u> E.P.A. ID Code No. <u>WA-89-000-8967</u> Address <u>Richland, Wa 99352</u> Destination <u>Central landfill - chemical trench</u> Phone <u>Harlan Boynton 373-3516</u>		FROM: Generator <u>Battelle - PNL</u> E.P.A. ID Code No. <u>WA-89-000-8967</u> Address <u>Richland, WA 99352</u> Origin <u>324 Bldg/300 Area</u> Phone <u>Jeene Hobbs 376-1631</u>				
No Shipping Units	D.O.T. PROPER SHIPPING NAME	HAZARD CLASS	Haz. Mat. I.D. No.	EPA Haz. Waste No.	WEIGHT	LABELS REQUIRED (or Exemption No.)
<u>1018</u>	<u>magnesium nitrate</u>	<u>oxidizer</u>	<u>NR 1474</u>	<u>D003</u>		<u>oxidizer</u>
<u>1</u>	<u>Flammable liquid n.o.s. (kesel)</u>	<u>flammable liquid</u>	<u>UN 1993</u>	<u>D001</u>		<u>flammable liquid</u>
<u>4</u>	<u>Nitrate n.o.s. (manganese nitrate sol.)</u>	<u>oxidizer</u>	<u>NA 1477</u>	<u>D003</u>		<u>oxidizer</u>
<u>36</u>	<u>fine frit</u>	<u>unregulated</u>				

## PLACARDS REQUIRED

NOTE - Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property. The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding \$ \_\_\_\_\_ Per \_\_\_\_\_

Subject to Section 7 of the conditions, if this shipment is to be delivered to the consignee without recourse on the consignor, the consignor shall sign the following statement:  
The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.

(Signature of Consignor)

## FREIGHT CHARGES

PREPAID ☐ COLLECT ☐

RECEIVED, subject to the classifications and tariffs in effect on the date of the issue of this Bill of Lading, the property described above in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, consigned, and destined as indicated above which said carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed as to each carrier of all or any of said property over all or any portion of said route to destination and as to each party at any time interested in all or any said property, that every service to be performed hereunder shall be subject to all the bill of lading terms and conditions in the governing classification on the date of shipment. Shipper hereby certifies that he is familiar with all the bill of lading terms and conditions in the governing classification and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

## ALTERNATE DESTINATION (EMERGENCY ONLY)

T/S/D FACILITY none  
E.P.A. ID Code No. \_\_\_\_\_  
Address \_\_\_\_\_  
Destination \_\_\_\_\_

## EMERGENCY RESPONSE INFORMATION

CONTACT Name Jeene Hobbs  
Phone 376-1631  
National Response Center 1-800-424-8802  
In D. C. 426-2675

## CERTIFICATION

This is to certify that the above named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the E.P.A.

Generator Signature Jeene Hobbs Date \_\_\_\_\_

TRANSPORTER #1 Michael Hobbs E.P.A. ID No. \_\_\_\_\_  
Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Phone \_\_\_\_\_

This is to certify acceptance of the hazardous waste shipment.

Transporter No. 1 Signature \_\_\_\_\_ Date \_\_\_\_\_

TRANSPORTER #2 \_\_\_\_\_ E.P.A. ID No. \_\_\_\_\_  
Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Phone \_\_\_\_\_

This is to certify acceptance of the hazardous waste shipment.

Transporter No. 2 Signature \_\_\_\_\_ Date \_\_\_\_\_

## TREATMENT/STORAGE/DISPOSAL FACILITY

T/S/D FACILITY This is to certify acceptance of the hazardous waste for treatment, storage, or disposal.  
Signature Rusty Long Date 4/17/84

TRANSMITTED #2 ADV

CCC. 017-BLS-6 (8-PL)

HAZARDOUS WASTE

# HAZARDOUS WASTE MANIFEST

## THIS SHIPPING ORDER

must be legibly filled in, in ink, in indelible pencil, or in Carbon, and retained by the Agent.

MANIFEST DOCUMENT NUMBER

PPD-84-001

TO: T/S/D FACILITY <u>XXXXXX 2727-S</u>	FROM: Generator Pu Process Development Unit
E.P.A. ID Code No. <u>WA7890008967</u>	E.P.A. ID Code No. <u>WA7890008967</u>
Address	Address <u>234-57/200 West</u>
Destination	Origin
Phone	Phone

No Shipping Units	D.O.T. PROPER SHIPPING NAME	HAZARD CLASS	Haz Mat ID No.	EPA Haz Waste No.	WEIGHT	LABELS REQUIRED (or Exemption No.)
1	Sulfurous Acid	Corrosive	UN1833	D002		Corrosive
3	Magnesium Nitrate	Oxidizer	UN1474	D003	250pd	Oxidizer
1	Sodium Phosphate	ORME	NA9147	NA	75pd	None
1	Sodium Nitrate	Oxidizer	UN1498	D003	75pd	Oxidizer
6	Sodium Nitrite	Oxidizer	UN1500	D003	300	Oxidizer
1	Nitrate n.o.s. (Bismuth)	Oxidizer	NA1477	D003	100pds	Oxidizer

### PLACARDS REQUIRED

NOTE: Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property. The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding \$                      Per                     

Subject to Section 7 of the conditions, if this shipment is to be delivered to the consignee without recourse on the consignor, the consignor shall sign the following statement:  
The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.

FREIGHT CHARGES  
PREPAID ☐ COLLECT ☐

(Signature of Consignor)

RECEIVED, subject to the classifications and tariffs in effect on the date of the issue of this Bill of Lading, the property described above in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, consigned, and destined as indicated above which said carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed as to each carrier of all or any of said property over all or any portion of said route to destination and as to each party at any time interested in all or any said property, that every service to be performed hereunder shall be subject to all the bill of lading terms and conditions in the governing classification on the date of shipment. Shipper hereby certifies that he is familiar with all the bill of lading terms and conditions in the governing classification and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

### ALTERNATE DESTINATION (EMERGENCY ONLY)

### EMERGENCY RESPONSE INFORMATION

T/S/D FACILITY <u>N/A</u>	CONTACT Name <u>D. G. Bouse</u>
E.P.A. ID Code No. <u>                    </u>	Phone <u>373-2419</u>
Address <u>                    </u>	National Response Center <u>1-800-424-8802</u>
Destination <u>                    </u>	In D. C. <u>426-2675</u>

### CERTIFICATION

This is to certify that the above named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the E.P.A.

Generator Signature D. G. Bouse Date 2-17-84

TRANSPORTER #1 RHO Transportation E.P.A. ID No. WA7890008967  
Address 1171  
City RICHMOND State VA Zip 23262 Phone 666-54

This is to certify acceptance of the hazardous waste shipment.  
Transporter No. 1 Signature [Signature] Date 3-16-84

TRANSPORTER #2                      E.P.A. ID No.                       
Address                       
City                      State                      Zip                      Phone                     

This is to certify acceptance of the hazardous waste shipment.  
Transporter No. 2 Signature                      Date                     

### TREATMENT/STORAGE/DISPOSAL FACILITY

This is to certify acceptance of the hazardous waste for treatment, storage, or disposal.  
T/S/D FACILITY Signature D. E. Phelps Date 3-16-1984

TRANSPORTER #1 COPY

000392

HAZARDOUS WASTE

# HAZARDOUS WASTE MANIFEST

## THIS SHIPPING ORDER

must be legibly filled in, in ink, in indelible pencil, or in Carbon, and retained by the Agent.

MANIFEST DOCUMENT NUMBER

This document refers to  
disposal request  
#PHL-84-001-M

PHL-84-001-M

TO: T/S/D FACILITY Rockwell Hanford Operations	FROM: Generator Battelle-PHL
E.P.A. ID Code No. WA-39-000-8967	E.P.A. ID Code No. WA-39-000-8967
Address Richland, WA 99382	Address Richland, WA 99382
Destination Cenral Landfill - chemical trench	Origin 377 Bldg/300 Area
Phone Harlan Boynton 373-3516	Phone Jeene Hobbs 376-1631

No. Shipping Units	D.O.T. PROPER SHIPPING NAME	HAZARD CLASS	Haz. Mat. I.D. No.	EPA Haz. Waste No.	WEIGHT	LABELS REQUIRED (or Exemption No.)
1	Waste corrosive liquid, n.o.s. (picrolonic acid, formic acid, & vanadous formate) (the liquid has been absorbed.)	corrosive material	UN1760	2002	250	hazardous waste & corrosive

### PLACARDS REQUIRED

NOTE - Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property. The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding \$ \_\_\_\_\_ Per \_\_\_\_\_

Subject to Section 7 of the conditions, if this shipment is to be delivered to the consignee without recourse on the completion, the consignor shall sign the following statement:  
The consignor shall not make delivery of this shipment without payment of freight and all other lawful charges.

FREIGHT CHARGES  
PREPAID ☐ COLLECT ☐

RECEIVED, subject to the classifications and tariffs in effect on the date of the issue of this Bill of Lading, the property described above in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, consigned, and destined as indicated above which said carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed as to each carrier of all or any of said property over all or any portion of said route to destination and as to each party at any time interested in all or any said property, that every service to be performed hereunder shall be subject to all the bill of lading terms and conditions in the governing classification on the date of shipment. Shipper hereby certifies that he is familiar with all the bill of lading terms and conditions in the governing classification and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

ALTERNATE DESTINATION (EMERGENCY ONLY)	EMERGENCY RESPONSE INFORMATION
T/S/D FACILITY <u>None</u>	CONTACT Name <u>Jeene Hobbs</u>
E.P.A. ID Code No. _____	Phone <u>376-1631</u>
Address _____	National Response Center 1-800-424-8802
Destination _____	in D. C. 426-2675

### CERTIFICATION

This is to certify that the above named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the E.P.A.

Generator Signature Jeene Hobbs Date 13 May 84

TRANSPORTER #1 \_\_\_\_\_ E.P.A. ID No. \_\_\_\_\_  
Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Phone \_\_\_\_\_

This is to certify acceptance of the hazardous waste shipment.  
Transporter No. 1 Signature \_\_\_\_\_ Date \_\_\_\_\_

TRANSPORTER #2 \_\_\_\_\_ E.P.A. ID No. \_\_\_\_\_  
Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Phone \_\_\_\_\_

This is to certify acceptance of the hazardous waste shipment.  
Transporter No. 2 Signature \_\_\_\_\_ Date 5-23-1984

### TREATMENT/STORAGE/DISPOSAL FACILITY

This is to certify acceptance of the hazardous waste for treatment, storage, or disposal.  
T/S/D FACILITY Signature O E F. Hobbs Date 5-23-1984

TRANSPORTER #2 COPY

000392



# Internal Letter



Rockwell International

Date September 5, 1984

No. 65950-84-526

TO: Name Organization, Internal Address)

FROM: Name Organization, Internal Address, Phone)

M. J. Kelley  
271-B/200 East

L. F. Lust  
Solid Waste Processing  
& Disposal Unit  
3-4802

Subject: APPROVED DISPOSAL REQUEST 10-33 (ROCKWELL)

Reference: Application to Dispose of Nonradioactive Hazardous Waste,  
M. J. Kelley, July 23, 1984

The Solid Waste Processing and Disposal Unit has completed review of referenced Disposal Request 10-33. The disposal method for these wastes is outlined on the attached "Disposal Analysis 10-33."

All packaging, labeling, and marking of the waste materials shall be completed in accordance with the prescribed instructions which are based on Department of Transportation (DOT) Regulations 49 CFR 171-179. A Hazardous Waste Manifest is required to accompany all waste shipments in accordance with 40 CFR 263.

It should be noted that two drums of oil are designated for Offsite Disposal as bulk liquid because the presence of trace amounts of PCB preclude use on roads for dust control. However, since the PCB concentration is less than 50 ppm, this oil is not regulated as PCB contaminated.

Arrangements for transporting waste packages to the 2727-S storage facility (for forwarding to offsite disposal) and for transporting non-hazardous oil to Rockwell Road, Track and Maintenance is a generator responsibility and may be implemented following compliance with Disposal Analysis 10-33 instructions and preparation of the Hazardous Waste Manifest. Contact A. D. Poor (6-1452) for transport arrangements.

Inspections by Rockwell of package content and integrity will be made as required to certify that the waste is prepared in the manner designated on Disposal Analysis 10-33. Failure to package in the manner described in the Disposal Analysis 10-33 will result in suspension of disposal privileges for the offending facility.

Should you require further assistance regarding the disposition of wastes listed on Disposal Analysis 10-33, please contact me.

*L. F. Lust*

L. F. Lust  
Solid Waste Processing & Disposal Unit

LFL:ra

Att.

cc: D. R. Groth w/att HCB.  
A. D. Poor w/att

000393

REQUEST TO DISPOSE OF NONRADIOACTIVE HAZARDOUS WASTE

10-43

I. GENERATION: The Generator should complete Part I and forward this form to:

W388T JWPED  
202 S/200 West 1750 E/200 E  
Rockwell

A. Generator's Name: C. Veneziano Phone: 6-6131 Address: 747 Bldg. Company: HEHF

B. Custodian's Name: same Phone:  Address:  Company:

C. Waste Description: (If more than five items, attach additional sheets)

Generic Name	Total Quantity	Type of Container	Number of Containers	(Check One)			Hazard Class
				Sol.	Liq.	Gas	
1. Dioctyl. Sebacate.	10 gal	55 GAL Drum	1	X			
2.							
3.							
4.							
5.							

D. Have appropriate labels been affixed to containers? YES Not required

E. Have efforts been made to recycle (e.g., excess) waste? no

F. Has waste been treated in any manner? yes If so, how? Liquid made solid by vermiculite

G. Storage Location: 747 Bldg.

H. "I hereby certify that this material has been released by Radiation Monitoring (if applicable) and that Part One of this form has been completed to the best of my knowledge." Survey Card Number:

Generator's Signature: Cynthia D. Veneziano

Date: 7-31-84

II. APPROVAL

A. Approved for disposal by Name: L. F. Lust Phone: 3-4106 Address: 7750 E Co.: RHO

Date: 8-14-84 Signature: L. F. Lust

B. Packaging Requirements (specify): Ref. Disposal Analysis 10-43

C. Disposal Location: ✓ Chemical Trench,  Asbestos Trench,   
(check one)  212-P (Storage),  Other

III. TRANSPORTATION/DISPOSAL

A. Transporter's Name: David L. Mangum Phone: 6-8860 Address: 1171 Bldg Company: RHO

B. Date: 8-24-1984

David L. Mangum

00039





Rockwell  
International

Ms. Cynthia Veneziano

Page 2

SEP 05 1984

Should you require further assistance regarding the disposition of wastes listed on Disposal Analysis 10-43, please contact me on 3-4106.

Very truly yours,

*L. F. Lust*

L. F. Lust  
Solid Waste Processing & Disposal Unit

LFL:ra

Att.

cc: D. R. Groth  
A. D. Poor

000396

# REQUEST TO DISPOSE OF NONRADIOACTIVE HAZARDOUS WASTE

I. **GENERATION:** The Generator should complete Part I and forward this form to:

WS&DT  
202-S/200 West  
Rockwell

4-15

A. Generator's Name: Mike Fullmer Phone: 376-8148 Address: 1167-A/1100 Company: Rockwell  
 B. Custodian's Name: Emory Stubblefield Phone: 509-535-5572 Address: 535 Offner Rd. Company: N/A  
 C. Waste Description: (If more than five items, attach additional sheets) WA.

Generic Name	Total Quantity	Type of Container	Number of Containers	(Check One)			Hazard Class
				Sol.	Liq.	Gas	
1. <u>Asbestos</u>	<u>23 cu. yd. a load</u>						
2.							
3.							
4.							
5.							

D. Have appropriate labels been affixed to containers? Not required X

E. Have efforts been made to recycle (e.g., excess) waste? N/A

F. Has waste been treated in any manner? No If so, how? \_\_\_\_\_

G. Storage Location: Central Landfill

H. "I hereby certify that this material has been released by Radiation Monitoring (if applicable) and that Part One of this form has been completed to the best of my knowledge." Survey Card Number: See DST (attached)

Generator's Signature: Michael W. Fullmer Date: Open Request

## I. APPROVAL

A. Approved for disposal by Name: G.R. Cox Phone: 3-3679 Address: 202-S/200-W Co. Company: Rockwell

Date: 6/22/83 Signature: G.R. Cox

B. Packaging Requirements (specify): Double bagged & wetted. Open Request: note number of trucks and close-out when job is finished.

C. Disposal Location: \_\_\_\_\_ Chemical Trench, X Asbestos Trench, \_\_\_\_\_  
 (check one) \_\_\_\_\_ 212-P (Storage), \_\_\_\_\_ Other \_\_\_\_\_

## II. TRANSPORTATION/DISPOSAL

A. Transporter(s) Name: \_\_\_\_\_ Phone: \_\_\_\_\_ Address: \_\_\_\_\_ Company: \_\_\_\_\_

B. Date Transported/Disposed: \_\_\_\_\_

C. Transporter(s) Signature: \_\_\_\_\_

000397

# REQUEST TO DISPOSE OF NONRADIOACTIVE HAZARDOUS WASTE

**I. GENERATION:** The Generator should complete Part I and forward this form to:

WS&DT  
202-S/200 West  
Rockwell

6-39a

A. Generator's Name: F. Stubblefield Co Phone: 525-5572 Address: 835 Off Road Rd Company: Same  
 B. Custodian's Name: Gailen Swanson Phone: 31977 Address: 100-B Company: Same  
 C. Waste Description: (If more than five items, attach additional sheets)

Generic Name	Total Quantity	Type of Container	Number of Containers	(Check One)			Hazard Class
				Sol.	Liq.	Gas	
1. <u>Asbr strum</u>	<u>30 quarts</u>	<u>Plastic bags</u>	<u>N/A.</u>	<u>X</u>			
2.							
3.							
4.							
5.							

D. Have appropriate labels been affixed to containers? Not required  
 E. Have efforts been made to recycle (e.g., excess) waste? N.A.  
 F. Has waste been treated in any manner? NO If so, how? \_\_\_\_\_  
 G. Storage Location: 183 C 100 C AREA  
 H. "I hereby certify that this material has been released by Radiation Monitoring (if applicable) and that Part One of this form has been completed to the best of my knowledge." Survey Card Number: \_\_\_\_\_

Generator's Signature: F. Stubblefield Co  
by Gailen Swanson Date: 1/18/84

## II. APPROVAL

A. Approved for disposal by Name: Gary R. Cox Phone: 33679 Address: 222-T/200 W Co. Company: Rockwell  
 Date: Jan. 18, 1984 Signature: Gary R. Cox  
 B. Packaging Requirements (specify): Double bagged and wetted  
\* Open Request for duration of 183 C/100 C Area D&D work  
 C. Disposal Location: \_\_\_\_\_ Chemical Trench, X Asbestos Trench, \_\_\_\_\_  
 (check one) \_\_\_\_\_ 212-P (Storage), \_\_\_\_\_ Other \_\_\_\_\_

## III. TRANSPORTATION/DISPOSAL

A. Transporter(s) Name: \_\_\_\_\_ Phone: \_\_\_\_\_ Address: \_\_\_\_\_ Company: \_\_\_\_\_  
 B. Date Transported/Disposed: \_\_\_\_\_  
 C. Transporter(s) Signature: \_\_\_\_\_

000398

# REQUEST TO DISPOSE OF NONRADIOACTIVE HAZARDOUS WASTE

I. GENERATION: The Generator should complete Part I and forward this form to:

WS&DT  
202-S/200 West  
Rockwell

6-396

A. Generator's Name: E. Stubblefield Phone: 525-5572 Address: 635 off Hwy Rd Company: same  
 B. Custodian's Name: Gailen Swanson Phone: 3-1977 Address: 100-B Company: Same  
 C. Waste Description: (If more than five items, attach additional sheets)

Generic Name	Total Quantity	Type of Container	Number of Containers	(Check One)			Hazard Class
				Sol.	Liq.	Gas	
1. <u>Asbestos</u>	<u>150 cu ft</u>	<u>plastic bags</u>	<u>500</u>	<input checked="" type="checkbox"/>			
2.							
3.							
4.							
5.							

D. Have appropriate labels been affixed to containers? Not required  
 E. Have efforts been made to recycle (e.g., excess) waste? na  
 F. Has waste been treated in any manner? no If so, how? \_\_\_\_\_  
 G. Storage Location: 184-B 100-B area  
 H. "I hereby certify that this material has been released by Radiation Monitoring (if applicable) and that Part One of this form has been completed to the best of my knowledge." Survey Card Number: \_\_\_\_\_

Generator's Signature: E. Stubblefield Co. Gailen Swanson Date: 1/18/84

## II. APPROVAL

A. Approved for disposal by Name: Gary R. Cox Phone: 3-3679 Address: 222-T/200-W Co.: Rockwell  
 Date: Jan. 18, 1984 Signature: Gary R. Cox  
 B. Packaging Requirements (specify): Double bagged and wetted  
\* Open Request for duration of 184-B/100-B Area D&D work.  
 C. Disposal Location: \_\_\_\_\_ Chemical Trench, ☒ Asbestos Trench, \_\_\_\_\_  
 (check one) \_\_\_\_\_ 212-P (Storage), \_\_\_\_\_ Other \_\_\_\_\_

## III. TRANSPORTATION/DISPOSAL

A. Transporter(s) Name: \_\_\_\_\_ Phone: \_\_\_\_\_ Address: \_\_\_\_\_ Company: \_\_\_\_\_  
 B. Date Transported/Disposed: \_\_\_\_\_  
 C. Transporter(s) Signature: \_\_\_\_\_

000399

# REQUEST TO DISPOSE OF NONRADIOACTIVE HAZARDOUS WASTE

## I. GENERATION: The Generator should complete Part I and forward this form to:

WS&DT  
202-S/200 West  
Rockwell

6-39c

- A. Generator's Name: E. Stubblefield Co Phone: 525-5372 Address: 535 off-high Company: Same
- B. Custodian's Name: Gailen Swanson Phone: 3-1977 Address: 100-B Company: Same
- C. Waste Description: (If more than five items, attach additional sheets)

Generic Name	Total Quantity	Type of Container	Number of Containers	(Check One)			Hazard Class
				Sol.	Liq.	Gas	
<del>1. 100-C</del>	<del>75 bags</del>	<del>38 x 45 plastic bags</del>	<del>75</del>	<input checked="" type="checkbox"/>			
2. <u>Asbestos</u>							
3. <u>1-26-84</u>	<u>32 BAGS</u>						
4. <u>1-27-84</u>	<u>30 BAGS</u>						
5.							

- D. Have appropriate labels been affixed to containers? Not required
- E. Have efforts been made to recycle (e.g., excess) waste? NA
- F. Has waste been treated in any manner? no If so, how? \_\_\_\_\_
- G. Storage Location: Storage Tanks 100-C AREA.
- H. "I hereby certify that this material has been released by Radiation Monitoring (if applicable) and that Part One of this form has been completed to the best of my knowledge." Survey Card Number: \_\_\_\_\_

Generator's Signature: E. Stubblefield Co by Gailen Swanson Date: 1/18/84

## II. APPROVAL

- A. Approved for disposal by Name: Gary R. Cox Phone: 3-3679 Address: 272-T/200 W Co.: Rockwell
- Date: Jan 18, 1984 Signature: Gary R. Cox
- B. Packaging Requirements (specify): Double bagged and wetted
- \* Open Request from this project, for duration of 100-C Storage Tank Disposal
- C. Disposal Location: \_\_\_\_\_ Chemical Trench, ☒ Asbestos Trench, \_\_\_\_\_
- (check one) \_\_\_\_\_ 212-P (Storage), \_\_\_\_\_ Other \_\_\_\_\_

## III. TRANSPORTATION/DISPOSAL

- A. Transporter(s) Name: \_\_\_\_\_ Phone: \_\_\_\_\_ Address: \_\_\_\_\_ Company: \_\_\_\_\_
- B. Date Transported/Disposed: \_\_\_\_\_
- C. Transporter(s) Signature: \_\_\_\_\_



# REQUEST TO DISPOSE OF NONRADIOACTIVE HAZARDOUS WASTE

I. **GENERATION:** The Generator should complete Part I and forward this form to:

WS&DT  
202-S/200 West  
Rockwell

6-39d

A. Generator's Name: E. Stubblefield Co. Phone: 525-3372 Address: 535 W. FS near Rd. Company: Rockwell  
 B. Custodian's Name: Gailen Swanson Phone: 3-1977 Address: 100-B Company: Same  
 C. Waste Description: (If more than five items, attach additional sheets)

Generic Name	Total Quantity	Type of Container	Number of Containers	(Check One)			Hazard Class
				Sol.	Liq.	Gas	
1. <u>Ashes etc.</u>	<u>100 ft.</u>	<u>Plastic bag</u>	<u>114</u>	<u>X</u>			
2.							
3.							
4.							
5.							

D. Have appropriate labels been affixed to containers? Not required  
 E. Have efforts been made to recycle (e.g., excess) waste? NA  
 F. Has waste been treated in any manner? NO If so, how? \_\_\_\_\_  
 G. Storage Location: 184 DA 100 D Area  
 H. "I hereby certify that this material has been released by Radiation Monitoring (if applicable) and that Part One of this form has been completed to the best of my knowledge." Survey Card Number: \_\_\_\_\_  
 Generator's Signature: E. Stubblefield Co. Gailen Swanson Date: 1/18/84

## II. APPROVAL

A. Approved for disposal by Name: Gary R. Cox Phone: 3-3679 Address: 222-T/200-W Co. Rockwell  
 Date: Jan. 18, 1984 Signature: Gary R. Cox  
 B. Packaging Requirements (specify): Double bagged and wetted  
 \* Open Request for duration of 184 DA/100-D Area D&D work  
 C. Disposal Location: \_\_\_\_\_ Chemical Trench, X Asbestos Trench, \_\_\_\_\_  
 (check one) \_\_\_\_\_ 212-P (Storage), \_\_\_\_\_ Other \_\_\_\_\_

## III. TRANSPORTATION/DISPOSAL

A. Transporter(s) Name: \_\_\_\_\_ Phone: \_\_\_\_\_ Address: \_\_\_\_\_ Company: \_\_\_\_\_  
 B. Date Transported/Disposed: \_\_\_\_\_  
 C. Transporter(s) Signature: \_\_\_\_\_

# REQUEST TO DISPOSE OF NONRADIOACTIVE HAZARDOUS WASTE

I. **GENERATION:** The Generator should complete Part I and forward this form to:

WS&DT  
202-S/200 West  
Rockwell

9-15

A. Generator's Name: L. L. CRASS Phone: 3-3127 Address: 1114 100N Company: UNC

B. Custodian's Name: \_\_\_\_\_ Phone: \_\_\_\_\_ Address: \_\_\_\_\_ Company: \_\_\_\_\_

C. Waste Description: (If more than five items, attach additional sheets)

Generic Name	Total Quantity	Type of Container	Number of Containers	(Check One)			Hazard Class
				Sol.	Liq.	Gas	
1. <u>ASBESTOS COVERED</u>		<u>PLASTIC DOUBLE</u>		<u>X</u>			
2. <u>PIPE</u>		<u>WRAPPED</u>					
3.							
4.							
5.							

D. Have appropriate labels been affixed to containers? YES Not required \_\_\_\_\_

E. Have efforts been made to recycle (e.g. excess) waste? NO

F. Has waste been treated in any manner? NO If so, how? \_\_\_\_\_

G. Storage Location: 100-F D&D project

H. "I hereby certify that this material has been released by Radiation Monitoring (if applicable) and that Part One of this form has been completed to the best of my knowledge." Survey Card Number: \_\_\_\_\_

Generator's Signature: L. L. Crass Date: 5-3-84

## II. APPROVAL

A. Approved for disposal by Name: G. R. Cox Phone: 33679 Address: 222-T/200W Co.: Rockwell

Date: May 14, 1984 Signature: G. R. Cox

B. Packaging Requirements (specify): Double Wrapped in Plastic (Note: Open Request for this project)

C. Disposal Location: \_\_\_\_\_ Chemical Trench, X Asbestos Trench, \_\_\_\_\_  
(check one) \_\_\_\_\_ 212-P (Storage), \_\_\_\_\_ Other \_\_\_\_\_

## III. TRANSPORTATION/DISPOSAL

A. Transporter(s) Name: \_\_\_\_\_ Phone: \_\_\_\_\_ Address: \_\_\_\_\_ Company: \_\_\_\_\_

B. Date Transported/Disposed: \_\_\_\_\_

C. Transporter(s) Signature: \_\_\_\_\_

DATE: \_\_\_\_\_

CENTRAL LANDFILL

BNW  
UNC  
RHO  
JAJ

OTHERS

CONTRACTORS

VOLUME

CONTRACTORS

VOLUME

Asbestos 6-26-1984

128' F 100' F UNC  
Asbestos

12 YARDS

128' F 100' F UNC

512 CU FT

Asbestos 8-15-1984

100-B UNC

400 CU FT

100-B-10.5 UNC

512 CU FT

000103

JAJ CONTRACTORS  
 OTHERS

[illegible]

## ASBESTOS DISPOSAL REQUEST

The Industrial Hygiene & Safety Department (IH&S) of Rockwell Hanford Operations has control of asbestos management at Hanford. Accordingly, IH&S has established the following disposal requirements for asbestos at the Central Landfill Asbestos Trench:

1. A radiation release must be obtained for any asbestos emanating from a Radiation Zone.
2. All asbestos material packaged for disposal must be thoroughly wetted to eliminate any airborne asbestos particles during transportation, handling, or burial.
3. All asbestos material must be doubled plastic bagged or wrapped (6 mil or equivalent) to eliminate any airborne asbestos particles. A seal to preclude environmental or personnel exposure should be provided.
4. An accurate estimate of the asbestos volume must be provided along with the following information:

Generator's Name: John Morris / Larry Browne

Phone Number: 3-2338 / 3-3313

Contractor Contracted By: UNC - Tim Huber

Location: 182 N 6N Estimated Volume (ft<sup>3</sup>): 270

I have read and accept responsibility for the above outlined requirements for disposal of asbestos material.

Generator Name: JM Browne

Date: 12/17/84

*Joel Cooper*  
*Health Physicist*  
*Radioactive Services*

The above requirements have been met and the estimated volume appears correct.

Landfill Operator: D E Phelps

Date: 12-20-1984

## ASBESTOS DISPOSAL REQUEST

The Industrial Hygiene & Safety Department (IH&S) of Rockwell Hanford Operations has control of asbestos management at Hanford. Accordingly, IH&S has established the following disposal requirements for asbestos at the Central Landfill Asbestos Trench:

1. A radiation release must be obtained for any asbestos emanating from a Radiation Zone.
2. All asbestos material packaged for disposal must be thoroughly wetted to eliminate any airborne asbestos particles during transportation, handling, or burial.
3. All asbestos material must be doubled plastic bagged or wrapped (6 mil or equivalent) to eliminate any airborne asbestos particles. A seal to preclude environmental or personnel exposure should be provided.
4. An accurate estimate of the asbestos volume must be provided along with the following information:

Generator's Name: RONALD L. NELSON

Phone Number: 373-2323

Contractor Contracted By: ROCKWELL HANFORD OPS.

Location: 202A/200E Estimated Volume (ft<sup>3</sup>): 8

I have read and accept responsibility for the above outlined requirements for disposal of asbestos material.

Generator Name: Ronald L. Nelson

Date: December 17, 1984

The above requirements have been met and the estimated volume appears correct.

Landfill Operator: D E Phelps

Date: 12-17-1984

## ASBESTOS DISPOSAL REQUEST

The Industrial Hygiene & Safety Department (IH&S) of Rockwell Hanford Operations has control of asbestos management at Hanford. Accordingly, IH&S has established the following disposal requirements for asbestos at the Central Landfill Asbestos Trench:

1. A radiation release must be obtained for any asbestos emanating from a Radiation Zone.
2. All asbestos material packaged for disposal must be thoroughly wetted to eliminate any airborne asbestos particles during transportation, handling, or burial.
3. All asbestos material must be doubled plastic bagged or wrapped (6 mil or equivalent) to eliminate any airborne asbestos particles. A seal to preclude environmental or personnel exposure should be provided.
4. An accurate estimate of the asbestos volume must be provided along with the following information:

Generator's Name: Westinghouse Hanford

Phone Number: 376-3743

Contractor Contracted By: RAO Hensley

Location: 200A / under water tower

Estimated Volume (ft<sup>3</sup>): 336

I have read and accept responsibility for the above outlined requirements for disposal of asbestos material.

Generator Name: RAO Hensley

Date: 11-14-84

The above requirements have been met and the estimated volume appears correct.

Landfill Operator: D E Phelps

Date: 11-16-1984

<b>UNIFORM HAZARDOUS WASTE MANIFEST</b>		1. Generator's US EPA ID No.	Manifest Document No.	2. Page 1 of 1	Information in the shaded areas is not required by Federal law.
3. Generator's Name and Mailing Address <i>Westinghouse Hanford</i> <i>Richland WA</i>		4. Generator's Phone <i>376-3743</i>		5. US EPA ID Number <i>WA 780008967</i>	
6. Transporter 1 Company Name <i>Rackwell Hanford</i>		7. Transporter 2 Company Name <i>N/A</i>		8. US EPA ID Number <i>WA 780008967</i>	
9. Designated Facility Name and Site Address <i>Rackwell Hanford</i> <i>Sand fill</i>		10. US EPA ID Number <i>WA 780008967</i>		11. State Manifest Document Number	
12. State Generator's ID		13. State Transporter's ID		14. State Transporter's Phone	
15. State Transporter's ID		16. State Transporter's Phone		17. State Facility's ID	
18. Facility's Phone		19. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)		20. Containers	
21. Containers		22. Total Quantity		23. Unit	
24. Waste No.		25. Additional Descriptions for Materials Listed Above		26. Handling Codes for Wastes Listed Above	
27. Special Handling Instructions and Additional Information		28. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations.		29. Date	
30. Printed/Typed Name <i>RD Henskel</i>		31. Signature <i>RD Henskel</i>		32. Date <i>11/14/84</i>	
33. Transporter 1 Acknowledgement of Receipt of Materials		34. Printed/Typed Name <i>H. J. Mapey</i>		35. Signature <i>H. J. Mapey</i>	
36. Transporter 2 Acknowledgement of Receipt of Materials		37. Printed/Typed Name <i>H. J. Mapey</i>		38. Signature <i>H. J. Mapey</i>	
39. Discrepancy Indication Space		40. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.		41. Date	
42. Printed/Typed Name <i>DE Phelps</i>		43. Signature <i>DE Phelps</i>		44. Date <i>11/16/84</i>	



## ASBESTOS DISPOSAL REQUEST

The Industrial Hygiene & Safety Department (IH&S) of Rockwell Hanford Operations has control of asbestos management at Hanford. Accordingly, IH&S has established the following disposal requirements for asbestos at the Central Landfill Asbestos Trench:

1. A radiation release must be obtained for any asbestos emanating from a Radiation Zone.
2. All asbestos material packaged for disposal must be thoroughly wetted to eliminate any airborne asbestos particles during transportation, handling, or burial.
3. All asbestos material must be doubled plastic bagged or wrapped (6 mil or equivalent) to eliminate any airborne asbestos particles. A seal to preclude environmental or personnel exposure should be provided.
4. An accurate estimate of the asbestos volume must be provided along with the following information:

Generator's Name: J. E. Hodgson

Phone Number: 3-3368 or 3-4661

Contractor Contracted By: UAC

Location: 100-D-105-D

Estimated Volume (ft<sup>3</sup>): 512

I have read and accept responsibility for the above outlined requirements for disposal of asbestos material.

Generator Name: J. E. Hodgson

Date: 11-15-84

The above requirements have been met and the estimated volume appears correct.

Landfill Operator: D. E. Phelps

Date: 11-15-1984

6-10-80

~~Fiber glass~~  
**ASBESTOS DISPOSAL REQUEST**

The Industrial Hygiene & Safety Department (IH&S) of Rockwell Hanford Operations has control of asbestos management at Hanford. Accordingly, IH&S has established the following disposal requirements for asbestos at the Central Landfill Asbestos Trench:

1. A radiation release must be obtained for any asbestos emanating from a Radiation Zone.
2. All asbestos material packaged for disposal must be thoroughly wetted to eliminate any airborne asbestos particles during transportation, handling, or burial.
3. All asbestos material must be doubled plastic bagged or wrapped (6 mil or equivalent) to eliminate any airborne asbestos particles. A seal to preclude environmental or personnel exposure should be provided.
4. An accurate estimate of the asbestos volume must be provided along with the following information:

Generator's Name: NS PARSONS

Phone Number: 373-4000

Contractor Contracted By: RHO

Location: 2101-A1 / LOCK # 110

Estimated Volume (ft<sup>3</sup>): 8 (1 load truck)

I have read and accept responsibility for the above outlined requirements for disposal of asbestos material.

Generator Name: W. J. Parson

Date: 11-14-84

The above requirements have been met and the estimated volume appears correct.

Landfill Operator: D E Phelps

Date: 11-14-1984

614-3

Fiberglass  
ASBESTOS DISPOSAL

RADIATION RELEASE

BLDG. 2701 A

DATE 11-14-84

RELEASED BY

REK RPT  
-RADIATION MONITORING

REMARKS:

The Industrial Hygiene & Safety Department (IH&S) of asbestos management at Hanford. Accordingly, requirements for asbestos at the Central Landfill A

1. A radiation release must be obtained for any
2. All asbestos material packaged for disposal must be thoroughly wetted to eliminate any airborne asbestos particles during transportation, handling, or burial.
3. All asbestos material must be doubled plastic bagged or wrapped (6 mil or equivalent) to eliminate any airborne asbestos particles. A seal to preclude environmental or personnel exposure should be provided.
4. An accurate estimate of the asbestos volume must be provided along with the following information:

Generator's Name: H.S. PARSONS

Phone Number: 373-4000

Contractor Contracted By: RHO

Location: 272-AW 200-C Estimated Volume (ft<sup>3</sup>): 4 (12500 LBS)

I have read and accept responsibility for the above outlined requirements for disposal of asbestos material.

Generator Name: H.S. Parson

Date: 11-14-84

The above requirements have been met and the estimated volume appears correct.

Landfill Operator: D E Phelps

Date: 11-14-1984

5  
7  
3  
0  
2  
2  
1  
1  
9

## ASBESTOS DISPOSAL REQUEST

The Industrial Hygiene & Safety Department (IH&S) of Rockwell Hanford Operations has control of asbestos management at Hanford. Accordingly, IH&S has established the following disposal requirements for asbestos at the Central Landfill Asbestos Trench:

1. A radiation release must be obtained for any asbestos emanating from a Radiation Zone.
2. All asbestos material packaged for disposal must be thoroughly wetted to eliminate any air-borne asbestos particles during transportation, handling, or burial.
3. All asbestos material must be doubled plastic bagged or wrapped (6 mil or equivalent) to eliminate any airborne asbestos particles. A seal to preclude environmental or personnel exposure should be provided.
4. An accurate estimate of the asbestos volume must be provided along with the following information:

Generator's Name: Eugene L. Green

Phone Number: 3-2355

Contractor Contracted By: RHC

Location: 2101M

Estimated Volume (ft<sup>3</sup>): 100 cu ft.

I have read and accept responsibility for the above outlined requirements for disposal of asbestos material.

Generator Name: Eugene L. Green

Date: 10/30/84

The above requirements have been met and the estimated volume appears correct.

Landfill Operator: DE Phelps

Date: 11-1-1984

✓  
ASBESTOS DISPOSAL REQUEST

The Industrial Hygiene & Safety Department (IH&S) of Rockwell Hanford Operations has control of asbestos management at Hanford. Accordingly, IH&S has established the following disposal requirements for asbestos at the Central Landfill Asbestos Trench:

1. A radiation release must be obtained for any asbestos emanating from a Radiation Zone.
2. All asbestos material packaged for disposal must be thoroughly wetted to eliminate any airborne asbestos particles during transportation, handling, or burial.
3. All asbestos material must be doubled plastic bagged or wrapped (6 mil or equivalent) to eliminate any airborne asbestos particles. A seal to preclude environmental or personnel exposure should be provided.
4. An accurate estimate of the asbestos volume must be provided along with the following information:

Generator's Name: H.L. Campbell

Phone Number: 31121

Contractor Contracted By: R.H.O.

Location: 284 W Estimated Volume (ft<sup>3</sup>): 100 cu ft

I have read and accept responsibility for the above outlined requirements for disposal of asbestos material.

Generator Name: H.L. Campbell

Date: 10-30-84

The above requirements have been met and the estimated volume appears correct.

Landfill Operator: D.E. Phelps

Date: 11-1-1984

# ASBESTOS DISPOSAL REQUEST

The Industrial Hygiene & Safety Department (IH&S) of Rockwell Hanford Operations has control of asbestos management at Hanford. Accordingly, IH&S has established the following disposal requirements for asbestos at the Central Landfill Asbestos Trench:

1. A radiation release must be obtained for any asbestos emanating from a Radiation Zone.
2. All asbestos material packaged for disposal must be thoroughly wetted to eliminate any airborne asbestos particles during transportation, handling, or burial.
3. All asbestos material must be doubled plastic bagged or wrapped (6 mil or equivalent) to eliminate any airborne asbestos particles. A seal to preclude environmental or personnel exposure should be provided.
4. An accurate estimate of the asbestos volume must be provided along with the following information:

Generator's Name: Clyde C Morris

Phone Number: 32385

Contractor Contracted By: BHO

Location: 271 U

Estimated Volume (ft<sup>3</sup>):

2-Dumpsters

2 @ 200<sup>3</sup> Each

I have read and accept responsibility for the above outlined requirements for disposal of asbestos material.

Generator Name: Clyde C Morris

Date: 10-29-84

The above requirements have been met and the estimated volume appears correct.

Landfill Operator: 10 E Phelps

Date: 10-31-1984

## ASBESTOS DISPOSAL REQUEST

The Industrial Hygiene & Safety Department (IH&S) of Rockwell Hanford Operations has control of asbestos management at Hanford. Accordingly, IH&S has established the following disposal requirements for asbestos at the Central Landfill Asbestos Trench:

1. A radiation release must be obtained for any asbestos emanating from a Radiation Zone.
2. All asbestos material packaged for disposal must be thoroughly wetted to eliminate any airborne asbestos particles during transportation, handling, or burial.
3. All asbestos material must be doubled plastic bagged or wrapped (6 mil or equivalent) to eliminate any airborne asbestos particles. A seal to preclude environmental or personnel exposure should be provided.
4. An accurate estimate of the asbestos volume must be provided along with the following information:

Generator's Name:

Jan Davis

Phone Number:

376-3036

Contractor Contracted By:

Rockwell Hanford

Location:

1171 Bldg. 1100 Area

Estimated Volume (ft<sup>3</sup>):

1 CF

I have read and accept responsibility for the above outlined requirements for disposal of asbestos material.

Generator Name:

Jan Davis

Date:

10-24-84

The above requirements have been met and the estimated volume appears correct.

Landfill Operator:

A E Phelps

Date:

10-25-1984

## ASBESTOS DISPOSAL REQUEST

The Industrial Hygiene & Safety Department (IH&S) of Rockwell Hanford Operations has control of asbestos management at Hanford. Accordingly, IH&S has established the following disposal requirements for asbestos at the Central Landfill Asbestos Trench:

1. A radiation release must be obtained for any asbestos emanating from a Radiation Zone.
2. All asbestos material packaged for disposal must be thoroughly wetted to eliminate any airborne asbestos particles during transportation, handling, or burial.
3. All asbestos material must be doubled plastic bagged or wrapped (6 mil or equivalent) to eliminate any airborne asbestos particles. A seal to preclude environmental or personnel exposure should be provided.
4. An accurate estimate of the asbestos volume must be provided along with the following information:

Generator's Name: D. A. Prichard

Phone Number: 376-0895

Contractor Contracted By: J. A. Jones Const. Service

Location: 300 Area Estimated Volume (ft<sup>3</sup>): 2 LUGGERS-2750 Lb. ea.

I have read and accept responsibility for the above outlined requirements for disposal of asbestos material.

Generator Name: J. K. Griswold

Date: 10-11-84

RM

Survey Card # 500874

The above requirements have been met and the estimated volume appears correct.

Landfill Operator: D E Phelps

Date: 10-12-1984

000416



## HAZARDOUS WASTE MANIFEST

THIS SHIPPING ORDER

must be legibly filled in, in ink, in indelible pencil, or in carbon, and retained by the Agent.

MANIFEST DOCUMENT NUMBER

84-005

TO: T/S/D FACILITY Central Landfill FROM: Generator JA Jones Construction Service Co.  
 E.P.A. ID Code No. WA 7890008967 E.P.A. ID Code No. WA 7890008967  
 Address 801 First St Richland, WA 99352 Address 801 First St Richland, WA 99352  
 Destination 300 Area Origin 300 Area  
 Phone 376-0895 Phone 376-0895

No Shipping Units	D.O.T. PROPER SHIPPING NAME	HAZARD CLASS	Haz Mat ID No	IHA Haz Waste No	WEIGHT	LABELS REQUIRED (or Exemption No)
2	Asbestos	ORM-C		U013	2750 LB	YES
	LUGGERS				Per Lugger	

## PLACARDS REQUIRED

NOTE - Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property. The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding \$ Per 2

Freight to be paid by the shipper, it is the responsibility of the shipper to pay the freight to the carrier. The carrier shall not be responsible for the payment of freight and all other local charges.

## FREIGHT CHARGES

PREPAID ☐ COLLECT ☐

RECEIVED, subject to the classifications and tariffs in effect on the date of the issue of this Bill of Lading, the property described above in apparent good order, except as noted (contents and condition of contents of packages unknown), received, consigned, and destined as indicated above which said carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed as to each carrier of all or any of, said property over all or any portion of said route to destination and as to each party at any time interested in all or any said property, that every service to be performed hereunder shall be subject to all the bill of lading terms and conditions in the governing classification on the date of shipment. Shipper hereby certifies that he is familiar with all the bill of lading terms and conditions in the governing classification and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

ALTERNATE DESTINATION (EMERGENCY ONLY)	EMERGENCY RESPONSE INFORMATION
T/S/D FACILITY <u>Central Landfill</u>	CONTACT Name <u>JA Jones Construction Service Co.</u>
E.P.A. ID Code No. <u>WA 7890008967</u>	Phone <u>376-0895</u>
Address <u>801 First St Richland, WA 99352</u>	National Response Center <u>1-800-424-8802</u>
Destination <u>300 Area</u>	in D. C. <u>426-2675</u>

## CERTIFICATION

This is to certify that the above named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the E.P.A.

Generator Signature J. K. Griswold Date 10-11-84

TRANSPORTER #1 H. J. Moyer E.P.A. ID No. WA 7890008967  
 Address Richland State WA Zip 99352 Phone 68860  
 City Richland

This is to certify acceptance of the hazardous waste shipment.  
 Transporter No. 1 Signature H. J. Moyer Date 10-12-84

TRANSPORTER #2 H. J. Moyer E.P.A. ID No. WA 7890008967  
 Address Richland State WA Zip 99352 Phone 68860  
 City Richland

This is to certify acceptance of the hazardous waste shipment.  
 Transporter No. 2 Signature H. J. Moyer Date 10-12-84

TREATMENT/STORAGE/DISPOSAL FACILITY  
 T/S/D FACILITY Central Landfill  
 Signature D. E. Fisher Date 10-12-84

TRANSPORTER #1 COPY

000-117

HAZARDOUS WASTE

HAZARDOUS WASTE

## ASBESTOS DISPOSAL REQUEST

The Industrial Hygiene & Safety Department (IH&S) of Rockwell Hanford Operations has control of asbestos management at Hanford. Accordingly, IH&S has established the following disposal requirements for asbestos at the Central Landfill Asbestos Trench:

1. A radiation release must be obtained for any asbestos emanating from a Radiation Zone.
2. All asbestos material packaged for disposal must be thoroughly wetted to eliminate any airborne asbestos particles during transportation, handling, or burial.
3. All asbestos material must be doubled plastic bagged or wrapped (6 mil or equivalent) to eliminate any airborne asbestos particles. A seal to preclude environmental or personnel exposure should be provided.
4. An accurate estimate of the asbestos volume must be provided along with the following information:

Generator's Name: CARL C. SCHOCK

Phone Number: 3-2188

Contractor Contracted By: UNCC

Location: 100N Estimated Volume (ft<sup>3</sup>): 275

I have read and accept responsibility for the above outlined requirements for disposal of asbestos material.

Generator Name: Carl Schock

Date: 10-3-84

The above requirements have been met and the estimated volume appears correct.

Landfill Operator: Q E T. Luper

Date: 10-3-1984

## ASBESTOS DISPOSAL REQUEST

The Industrial Hygiene & Safety Department (IH&S) of Rockwell Hanford Operations has control of asbestos management at Hanford. Accordingly, IH&S has established the following disposal requirements for asbestos at the Central Landfill Asbestos Trench:

1. A radiation release must be obtained for any asbestos emanating from a Radiation Zone.
2. All asbestos material packaged for disposal must be thoroughly wetted to eliminate any airborne asbestos particles during transportation, handling, or burial.
3. All asbestos material must be doubled plastic bagged or wrapped (6 mil or equivalent) to eliminate any airborne asbestos particles. A seal to preclude environmental or personnel exposure should be provided.
4. An accurate estimate of the asbestos volume must be provided along with the following information:

Generator's Name: S. E. Jones

Phone Number: 3-2456

Contractor Contracted By: Rockwell Hanford

Location: 272BB Estimated Volume (ft<sup>3</sup>): 325 Cu. ft.

I have read and accept responsibility for the above outlined requirements for disposal of asbestos material.

Generator Name: Stan E. Jones

Date: 9/26/84

The above requirements have been met and the estimated volume appears correct.

Landfill Operator: D E Phelps

Date: 9-27-1984

## ASBESTOS DISPOSAL REQUEST

The Industrial Hygiene & Safety Department (IH&S) of Rockwell Hanford Operations has control of asbestos management at Hanford. Accordingly, IH&S has established the following disposal requirements for asbestos at the Central Landfill Asbestos Trench:

1. A radiation release must be obtained for any asbestos emanating from a Radiation Zone.
2. All asbestos material packaged for disposal must be thoroughly wetted to eliminate any airborne asbestos particles during transportation, handling, or burial.
3. All asbestos material must be doubled plastic bagged or wrapped (6 mil or equivalent) to eliminate any airborne asbestos particles. A seal to preclude environmental or personnel exposure should be provided.
4. An accurate estimate of the asbestos volume must be provided along with the following information:

Generator's Name: K. V. Hinkle NW

Phone Number: 373-1682

Contractor Contracted By: \_\_\_\_\_

Location: 185-187 D

Estimated Volume (ft<sup>3</sup>): 225

CO-FT

I have read and accept responsibility for the above outlined requirements for disposal of asbestos material.

Generator Name: K. V. Hinkle NW

Date: 9-26-84

The above requirements have been met and the estimated volume appears correct.

Landfill Operator: R. E. Thayer

Date: 9-26-1984

## ASBESTOS DISPOSAL REQUEST

The Industrial Hygiene & Safety Department (IH&S) of Rockwell Hanford Operations has control of asbestos management at Hanford. Accordingly, IH&S has established the following disposal requirements for asbestos at the Central Landfill Asbestos Trench:

1. A radiation release must be obtained for any asbestos emanating from a Radiation Zone.
2. All asbestos material packaged for disposal must be thoroughly wetted to eliminate any airborne asbestos particles during transportation, handling, or burial.
3. All asbestos material must be doubled plastic bagged or wrapped (6 mil or equivalent) to eliminate any airborne asbestos particles. A seal to preclude environmental or personnel exposure should be provided.
4. An accurate estimate of the asbestos volume must be provided along with the following information:

Generator's Name: CARL C. SCHOCK

Phone Number: 373-2188

Contractor Contracted By: UNC

Location: 100 N Estimated Volume (ft<sup>3</sup>): 275

I have read and accept responsibility for the above outlined requirements for disposal of asbestos material.

Generator Name: Carl Schock

Date: 9-20-84

The above requirements have been met and the estimated volume appears correct.

Landfill Operator: DE Phelps

Date: 9-20-1984

## ASBESTOS DISPOSAL REQUEST

The Industrial Hygiene & Safety Department (IH&S) of Rockwell Hanford Operations has control of asbestos management at Hanford. Accordingly, IH&S has established the following disposal requirements for asbestos at the Central Landfill Asbestos Trench:

1. A radiation release must be obtained for any asbestos emanating from a Radiation Zone.
2. All asbestos material packaged for disposal must be thoroughly wetted to eliminate any airborne asbestos particles during transportation, handling, or burial.
3. All asbestos material must be doubled plastic bagged or wrapped (6 mil or equivalent) to eliminate any airborne asbestos particles. A seal to preclude environmental or personnel exposure should be provided.
4. An accurate estimate of the asbestos volume must be provided along with the following information:

Generator's Name: B # 116 N.I. STE F

Phone Number: 375

Contractor Contracted By: CH

Location: ED Estimated Volume (ft<sup>3</sup>): 272

I have read and accept responsibility for the above outlined requirements for disposal of asbestos material.

Generator Name: \_\_\_\_\_

Date: \_\_\_\_\_

The above requirements have been met and the estimated volume appears correct.

Landfill Operator: D E Phelps

Date: 9-10-1984

ASBESTOS DISPOSAL REQUEST

The Industrial Hygiene & Safety Department (IH&S) of Rockwell Hanford Operations has control of asbestos management at Hanford. Accordingly, IH&S has established the following disposal requirements for asbestos at the Central Landfill Asbestos Trench:

1. A radiation release must be obtained for any asbestos emanating from a Radiation Zone.
2. All asbestos material packaged for disposal must be thoroughly wetted to eliminate any airborne asbestos particles during transportation, handling, or burial.
3. All asbestos material must be doubled plastic bagged or wrapped (6 mil or equivalent) to eliminate any airborne asbestos particles. A seal to preclude environmental or personnel exposure should be provided.
4. An accurate estimate of the asbestos volume must be provided along with the following information:

Generator's Name: Dee Prichard / J. A. Jones Construction Services Co.

Phone Number: 376-0895

Contractor Contracted By: J. A. Jones Construction Services Co.

Location: Boneyard 300 Area Estimated Volume (ft<sup>3</sup>): 108

I have read and accept responsibility for the above outlined requirements for disposal of asbestos material.

Generator Name: J. K. Griswold *JKG*

Date: 9-6-84

The above requirements have been met and the estimated volume appears correct.

Landfill Operator: DE Phelps

Date: 9-7-1984

## HAZARDOUS WASTE MANIFEST

## THIS SHIPPING ORDER

must be legibly filled in, in ink, in indelible pencil, or in  
Carbon, and retained by the Agent.

MANIFEST DOCUMENT NUMBER

84-004

TO: T/S/D FACILITY Central Landfill  
E.P.A. ID Code No.  
Address  
Destination  
Phone

FROM: Generator JA Jones Construction Services Co.  
E.P.A. ID Code No. WA7890008967  
Address 801 First St. Richland, WA 99352  
Origin 300 Area  
Phone 376-0895

No Shipping Units	D.O.T. PROPER SHIPPING NAME	HAZARD CLASS	Haz Mat LD. No.	EPA Haz Waste No.	WEIGHT	LABELS REQUIRED (or-Exemption No.)
2	Asbestos	ORM-C		U013	2750 LB	YES
	LUGGERS				Per Lugger	

## PLACARDS REQUIRED

NOTE - Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property. The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding \$ \_\_\_\_\_ Per \_\_\_\_\_

Shipment to Section 7 of the conditions, if the shipment is to be delivered to the consignee without recourse on the shipper, the shipper shall sign the following statement:  
The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.

FREIGHT CHARGES  
PREPAID COLLECT

(Signature of Consignee)

RECEIVED, subject to the classifications and tariffs in effect on the date of the issue of this Bill of Lading, the property described above in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, consigned, and destined as indicated above which said carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed as to each carrier of all or any of, said property over all or any portion of said route to destination and as to each party at any time interested in all or any said property, that every service to be performed hereunder shall be subject to all the bill of lading terms and conditions in the governing classification on the date of shipment.  
Shipper hereby certifies that he is familiar with all the bill of lading terms and conditions in the governing classification and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

## ALTERNATE DESTINATION (EMERGENCY ONLY)

T/S/D FACILITY  
E.P.A. ID Code No.  
Address  
Destination

## EMERGENCY RESPONSE INFORMATION

CONTACT Name  
Phone  
National Response Center 1-800-424-8802  
in D. C. 426-2675

## CERTIFICATION

This is to certify that the above named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the E.P.A.

Generator  
Signature J. K. Griswold Date 9-6-84

TRANSPORTER #1  
Address Rockwell 1171  
City Richland State WA Zip 99352 Phone 66654  
E.P.A. ID No.

Transporter No. 1  
Signature [Signature] Date 9-7-84  
This is to certify acceptance of the hazardous waste shipment.

TRANSPORTER #2  
Address Rockwell 1171  
City Richland State WA Zip 99352 Phone 66654  
E.P.A. ID No.

Transporter No. 2  
Signature [Signature] Date 9-7-84  
This is to certify acceptance of the hazardous waste shipment.

## TREATMENT/STORAGE/DISPOSAL FACILITY

T/S/D FACILITY  
Signature [Signature] Date 9-7-84  
This is to certify acceptance of the hazardous waste for treatment, storage, or disposal.

TRANSPORTER #1 COPY 000424



## ASBESTOS DISPOSAL REQUEST

The Industrial Hygiene & Safety Department (IH&S) of Rockwell Hanford Operations has control of asbestos management at Hanford. Accordingly, IH&S has established the following disposal requirements for asbestos at the Central Landfill Asbestos Trench:

1. A radiation release must be obtained for any asbestos emanating from a Radiation Zone.
2. All asbestos material packaged for disposal must be thoroughly wetted to eliminate any airborne asbestos particles during transportation, handling, or burial.
3. All asbestos material must be doubled plastic bagged or wrapped (6 mil or equivalent) to eliminate any airborne asbestos particles. A seal to preclude environmental or personnel exposure should be provided.
4. An accurate estimate of the asbestos volume must be provided along with the following information:

Generator's Name: Lee R. Harrington

Phone Number: 6-7031

Contractor Contracted By: Boeing Computer Services Richland, Inc.

Location: Federal Building, Room 528 Estimated Volume (ft<sup>3</sup>): 3 cubic feet

I have read and accept responsibility for the above outlined requirements for disposal of asbestos material.

Generator Name: *Lee R. Harrington*

Date: 8-13-84

The above requirements have been met and the estimated volume appears correct.

Landfill Operator: *D E Fisher*

Date: 8-17-1984

## HAZARDOUS WASTE MANIFEST

THIS SHIPPING ORDER

must be legibly filled in, in ink, in indelible Pencil, or in Carbon, and retained by the Agent.

MANIFEST DOCUMENT NUMBER

TO: T/S/D FACILITY **Rockwell Landfill** FROM: Generator **Lee R. Harrington**  
 E.P.A. ID Code No. E.P.A. ID Code No.  
 Address Address **528 Federal Building / 700 Area**  
 Destination **Rockwell Landfill** Origin **Federal Building / 700 Area**  
 Phone **376-1420 Dennis Poor** Phone **376-7031**

No Shipping Units	D.O.T. PROPER SHIPPING NAME	HAZARD CLASS	Haz Mat ID No	EPA Haz Waste No	WEIGHT	LABELS REQUIRED (or Exemption No.)
3 ea	Asbestos					

## PLACARDS REQUIRED

NOTE - Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property. The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding \$ \_\_\_\_\_ Per \_\_\_\_\_

Subject to Section 7 of the agreement, if this shipment is to be delivered to the consignee without receipt and the carrier, the carrier shall sign the following statement:  
 The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.

## FREIGHT CHARGES

PREPAID ☐ COLLECT ☐

(Signature of Consignor)

RECEIVED, subject to the classifications and tariffs in effect on the date of the issue of this Bill of Lading, the property described above in apparent good order, except as noted (contents and condition of contents as packages unknown), marked, consigned, and destined as indicated above which said carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed as to each carrier of all or any of said property over all or any portion of said route to destination and as to each party at any time interested in all or any said property, that every service to be performed hereunder shall be subject to all the bill of lading terms and conditions in the governing classification on the date of shipment. Shipper hereby certifies that he is familiar with all the bill of lading terms and conditions in the governing classification and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

## ALTERNATE DESTINATION (EMERGENCY ONLY)

## EMERGENCY RESPONSE INFORMATION

T/S/D FACILITY \_\_\_\_\_ CONTACT Name \_\_\_\_\_  
 E.P.A. ID Code No. \_\_\_\_\_ Phone \_\_\_\_\_  
 Address \_\_\_\_\_ National Response Center 1-800-424-8802  
 Destination \_\_\_\_\_ in D. C. 426-2675

## CERTIFICATION

This is to certify that the above named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the E.P.A.

Generator Signature **Lee R. Harrington** Date **August 10, 1984**

TRANSPORTER #1 **H. J. Mader** E.P.A. ID No. \_\_\_\_\_

Address **11711 62nd St NE** State **WA** Zip **98034** Phone **68860**  
 City **Redmond**

Transporter No. 1 This is to certify acceptance of the hazardous waste shipment.

Signature **H. J. Mader** Date **Aug 17 84**

TRANSPORTER #2 **H. J. Mader** E.P.A. ID No. \_\_\_\_\_

Address **11711 62nd St NE** State **WA** Zip **98034** Phone **68860**  
 City **Redmond**

Transporter No. 2 This is to certify acceptance of the hazardous waste shipment.

Signature **H. J. Mader** Date **Aug 17 84**

## TREATMENT/STORAGE/DISPOSAL FACILITY

T/S/D FACILITY This is to certify acceptance of the hazardous waste for treatment, storage, or disposal.  
 Signature **IOE Phelps** Date **8-17-1984**

TRANSPORTER #1 COPY

000426

✓  
ASBESTOS DISPOSAL REQUEST

The Industrial Hygiene & Safety Department (IH&S) of Rockwell Hanford Operations has control of asbestos management at Hanford. Accordingly, IH&S has established the following disposal requirements for asbestos at the Central Landfill Asbestos Trench:

1. A radiation release must be obtained for any asbestos emanating from a Radiation Zone.
2. All asbestos material packaged for disposal must be thoroughly wetted to eliminate any airborne asbestos particles during transportation, handling, or burial.
3. All asbestos material must be doubled plastic bagged or wrapped (6 mil or equivalent) to eliminate any airborne asbestos particles. A seal to preclude environmental or personnel exposure should be provided.
4. An accurate estimate of the asbestos volume must be provided along with the following information:

Generator's Name: Dee Prichard / J. A. Jones Const. Services Co.

Phone Number: 376-0895

Contractor Contracted By: J. A. Jones Const. Services Co.

Location: Boneyard 300 Area Estimated Volume (ft<sup>3</sup>): 103

I have read and accept responsibility for the above outlined requirements for disposal of asbestos material.

Generator Name: J. K. Griswold. JKH.

Date: 8-15-84

The above requirements have been met and the estimated volume appears correct.

Landfill Operator: OE Phelps

Date: 8-16-1984

# HAZARDOUS WASTE MANIFEST

## THIS SHIPPING ORDER

must be legibly filled in, in ink, in Indelible Pencil, or in Carbon, and retained by the Agent.

MANIFEST DOCUMENT NUMBER

84-003

TO: T/S/D FACILITY Central Landfill	FROM: Generator JA Jones Construction Services Co.
E.P.A. ID Code No.	E.P.A. ID Code No. WA7890008967
Address	Address 801 1st St. Richland, WA 99352
Destination	Origin 300 Area
Phone	Phone 376-0905

No. Shipping Units	D.O.T. PROPER SHIPPING NAME	HAZARD. CLASS.	Haz. Mat. I.D. No.	EPA Haz Waste No.	WEIGHT	LABELS REQUIRED (or Exemption No.)
2	Asbestos	ORM-C		U013	2750 LB	YES
LUGGERS					Per Luger	

### PLACARDS REQUIRED

NOTE - Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property. The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding \$ \_\_\_\_\_ Per \_\_\_\_\_

Subject to Section 7 of the conditions, if the shipment is to be delivered to the consignee without removal of the carrier, the carrier shall sign the following statement: The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.

FREIGHT CHARGES  
PREPAID ☐ COLLECT ☐

RECEIVED, subject to the classifications and tariffs in effect on the date of the issue of this Bill of Lading, the property described above in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, consigned, and destined as indicated above which said carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed as to each carrier of all or any of, said property over all or any portion of said route to destination and as to each party at any time interested in all or any said property, that every service to be performed hereunder shall be subject to all the bill of lading terms and conditions in the governing classification on the date of shipment. Shipper hereby certifies that he is familiar with all the bill of lading terms and conditions in the governing classification and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

ALTERNATE DESTINATION (EMERGENCY ONLY)		EMERGENCY RESPONSE INFORMATION	
T/S/D FACILITY	CONTACT Name		
E.P.A. ID Code No.	Phone		
Address	National Response Center	1-800-424-8802	
Destination		in D. C. 426-2675	

### CERTIFICATION

This is to certify that the above named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the E.P.A.

Generator Signature J. K. Griswold	Date 8-18-84
TRANSPORTER #1 Address City State Zip Phone	E.P.A. ID No.
This is to certify acceptance of the hazardous waste shipment.	
Transporter No. 1 Signature	Date
TRANSPORTER #2 Address City State Zip Phone	E.P.A. ID No.
This is to certify acceptance of the hazardous waste shipment.	
Transporter No. 2 Signature	Date

### TREATMENT/STORAGE/DISPOSAL FACILITY

T/S/D FACILITY Signature	This is to certify acceptance of the hazardous waste for treatment, storage, or disposal.	Date 8-16-1984
-----------------------------	---	----------------

TRANSPORTER #1 COPY

000428

## ASBESTOS DISPOSAL REQUEST

The Industrial Hygiene & Safety Department (IH&S) of Rockwell Hanford Operations has control of asbestos management at Hanford. Accordingly, IH&S has established the following disposal requirements for asbestos at the Central Landfill Asbestos Trench:

1. A radiation release must be obtained for any asbestos emanating from a Radiation Zone.
2. All asbestos material packaged for disposal must be thoroughly wetted to eliminate any airborne asbestos particles during transportation, handling, or burial.
3. All asbestos material must be doubled plastic bagged or wrapped (6 mil or equivalent) to eliminate any airborne asbestos particles. A seal to preclude environmental or personnel exposure should be provided.
4. An accurate estimate of the asbestos volume must be provided along with the following information:

Generator's Name: MICHAEL E THURMAN

Phone Number: 3-3544

Contractor Contracted By: UNC

Location: 100-B Estimated Volume (ft<sup>3</sup>): 400

I have read and accept responsibility for the above outlined requirements for disposal of asbestos material.

Generator Name: Michael E. Thurman

Date: 8-15-84

The above requirements have been met and the estimated volume appears correct.

Landfill Operator: M E T-Rippl

Date: 8-15-1984

## HAZARDOUS WASTE MANIFEST

## THIS SHIPPING ORDER

must be legibly filled in, in ink, in indelible pencil, or in Carbon, and retained by the Agent.

MANIFEST DOCUMENT NUMBER

TO:  
T/S/D FACILITY  
E.P.A. ID Code No.

Address  
Destination  
Phone

FROM:  
Generator  
E.P.A. ID Code No.  
Address  
Origin  
Phone

No Shipping Units	D.O.T. PROPER SHIPPING NAME	HAZARD CLASS	Haz Mat I.D. No.	EPA Haz Waste No.	WEIGHT	LABELS REQUIRED (or Exemption No.)
1	ASBESTOS	ORM-C			10 LB	

## PLACARDS REQUIRED

NOTE - Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property. The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding \$ \_\_\_\_\_ Per \_\_\_\_\_

Subject to Section 7 of the conditions, if this shipment is to be delivered to the consignee without release on the consignee, the carrier shall sign the following statement:  
The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.  
(Signature of Consignee)

FREIGHT CHARGES  
PREPAID ☐ COLLECT ☐

RECEIVED, subject to the classifications and tariffs in effect on the date of the issue of this Bill of Lading, the property described above in apparent good order, except as noted (contents and condition of contents of packages unknown, marked, consigned, and destined as indicated above which said carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed as to each carrier of all or any of, said property over all or any portion of said route to destination and as to each party at any time interested in all or any said property, that every service to be performed hereunder shall be subject to all the bill of lading terms and conditions in the governing classification on the date of shipment. Shipper hereby certifies that he is familiar with all the bill of lading terms and conditions in the governing classification and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

## ALTERNATE DESTINATION (EMERGENCY ONLY)

T/S/D FACILITY  
E.P.A. ID Code No.  
Address  
Destination

## EMERGENCY RESPONSE INFORMATION

CONTACT Name \_\_\_\_\_  
Phone \_\_\_\_\_  
National Response Center 1-800-424-8802  
in D. C. 426-2675

## CERTIFICATION

This is to certify that the above named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the E.P.A.

Generator  
Signature ER Kauer

Date 8-9-84

TRANSPORTER #1 H.J. Mader E.P.A. ID No. \_\_\_\_\_

Address 1171 1/2 West 1100 area  
City Richland WA State WA Zip 99351 Phone 638860

This is to certify acceptance of the hazardous waste shipment.

Transporter No. 1  
Signature H.J. Mader

Date 8-15-84

TRANSPORTER #2 H.J. Mader E.P.A. ID No. \_\_\_\_\_

Address 1171 1/2 West 1100 area  
City Richland WA State WA Zip 99351 Phone 638860

This is to certify acceptance of the hazardous waste shipment.

Transporter No. 2  
Signature H.J. Mader

Date 8-15-84

## TREATMENT/STORAGE/DISPOSAL FACILITY

T/S/D FACILITY DE T... This is to certify acceptance of the hazardous waste for treatment, storage, or disposal.  
Signature \_\_\_\_\_ Date 8-15-84

TRANSPORTER #1 COPY 000430

## ASBESTOS DISPOSAL REQUEST

The Industrial Hygiene & Safety Department (IH&S) of Rockwell Hanford Operations has control of asbestos management at Hanford. Accordingly, IH&S has established the following disposal requirements for asbestos at the Central Landfill Asbestos Trench:

1. A radiation release must be obtained for any asbestos emanating from a Radiation Zone.
2. All asbestos material packaged for disposal must be thoroughly wetted to eliminate any airborne asbestos particles during transportation, handling, or burial.
3. All asbestos material must be doubled plastic bagged or wrapped (6 mil or equivalent) to eliminate any airborne asbestos particles. A seal to preclude environmental or personnel exposure should be provided.
4. An accurate estimate of the asbestos volume must be provided along with the following information:

Generator's Name: VERN RICE

Phone Number: 31601

Contractor Contracted By: UNC

Location: 189 D Estimated Volume (ft<sup>3</sup>): 225

I have read and accept responsibility for the above outlined requirements for disposal of asbestos material.

Generator Name: Vernon T Rice

Date: 8-9-84

The above requirements have been met and the estimated volume appears correct.

Landfill Operator: D E Phelps

Date: 8-9-1984 189-D-100 Area

## ASBESTOS DISPOSAL REQUEST

The Industrial Hygiene & Safety Department (IH&S) of Rockwell Hanford Operations has control of asbestos management at Hanford. Accordingly, IH&S has established the following disposal requirements for asbestos at the Central Landfill Asbestos Trench:

1. A radiation release must be obtained for any asbestos emanating from a Radiation Zone.
2. All asbestos material packaged for disposal must be thoroughly wetted to eliminate any airborne asbestos particles during transportation, handling, or burial.
3. All asbestos material must be doubled plastic bagged or wrapped (6 mil or equivalent) to eliminate any airborne asbestos particles. A seal to preclude environmental or personnel exposure should be provided.
4. An accurate estimate of the asbestos volume must be provided along with the following information:

Generator's Name: J. A. Jones Const. Services Gee Prichard *928*

Phone Number: 376-0895

Contractor Contracted By: J. A. JONES CONST. SERVICES

Location: Coneyard 300 Area Estimated Volume (ft<sup>3</sup>): 108

I have read and accept responsibility for the above outlined requirements for disposal of asbestos material.

Generator Name: D. A. Prichard *D. A. Prichard*

Date: 7-31-84

The above requirements have been met and the estimated volume appears correct.

Landfill Operator: D. E. Fitch

Date: 8-1-1984



## HAZARDOUS WASTE MANIFEST

## THIS SHIPPING ORDER

must be legibly filled in, in ink, in Indelible Pencil, or in Carbon, and retained by the Agent.

MANIFEST DOCUMENT NUMBER

84-002

TO:	FROM:
T/S/D FACILITY Central Landfill	Generator JA Jones Construction Services Co.
E.P.A. ID Code No.	E.P.A. ID Code No. WA7890008967
Address	Address 801 1st St. Richland, WA 99352
Destination	Origin 300 Area
Phone	Phone 376-0895

No. Shipping Units	D.O.T. PROPER SHIPPING NAME	HAZARD CLASS	Haz Mat ID No.	EPA Haz Waste No.	WEIGHT	LABELS REQUIRED (or Exemption No.)
2	Asbestos	ORM-C		U013	2750 LB	YES
					Per lugger	

## PLACARDS REQUIRED

NOTE - Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property. The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding \$ \_\_\_\_\_ Per \_\_\_\_\_

Subject to Section 7 of the Codebook, if this shipment is to be transported in the container without marking as the container, the container shall use the following language:  
The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.  
(Signature of Consignor)

## FREIGHT CHARGES

PREPAID COLLECT

☐ ☐

RECEIVED, subject to the classifications and tariffs in effect on the date of the issue of this Bill of Lading, the property described above in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, consigned, and destined as indicated above which said carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed as to each carrier of all or any of, said property over all or any portion of said route to destination and as to each party at any time interested in all or any said property, that every service to be performed hereunder shall be subject to all the bill of lading terms and conditions in the governing classification on the date of shipment. Shipper hereby certifies that he is familiar with all the bill of lading terms and conditions in the governing classification and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

## ALTERNATE DESTINATION (EMERGENCY ONLY)

T/S/D FACILITY \_\_\_\_\_  
E.P.A. ID Code No. \_\_\_\_\_  
Address \_\_\_\_\_  
Destination \_\_\_\_\_

## EMERGENCY RESPONSE INFORMATION

CONTACT Name \_\_\_\_\_  
Phone \_\_\_\_\_  
National Response Center 1-800-424-8802  
in D. C. 426-2675

## CERTIFICATION

This is to certify that the above named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the E.P.A.

Generator Signature [Signature] Date \_\_\_\_\_

TRANSPORTER #1 [Signature] E.P.A. ID No. \_\_\_\_\_  
Address 1671 1st St. Richland, WA 99352  
City Richland State WA Zip 99352 Phone 638-60

This is to certify acceptance of the hazardous waste shipment.

Transporter No. 1 Signature \_\_\_\_\_ Date \_\_\_\_\_

TRANSPORTER #2 [Signature] E.P.A. ID No. \_\_\_\_\_  
Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Phone \_\_\_\_\_

This is to certify acceptance of the hazardous waste shipment.

Transporter No. 2 Signature \_\_\_\_\_ Date \_\_\_\_\_

## TREATMENT/STORAGE/DISPOSAL FACILITY

T/S/D FACILITY 05 Phelps This is to certify acceptance of the hazardous waste for treatment, storage, or disposal.  
Signature \_\_\_\_\_ Date \_\_\_\_\_

TRANSPORTER #1 COPY

000433

# REQUEST TO DISPOSE OF NONRADIOACTIVE HAZARDOUS WASTE

PLEASE CONTACT SKIP MOONEY 3-3562

**GENERATION:** The Generator should complete Part I and forward this form to:

~~WS&DT~~  
202-5X200 West  
Rockwell

GARY COX  
222-T/200W  
3-3679

A. Generator's Name: D.L. JACKSON Phone: 3-3622 Address: 202A/3/200E Company: RHO

B. Custodian's Name: SKIP MOONEY Phone: 3-3562 Address: 202A/1/200E Company: RHO

C. Waste Description: (If more than five items, attach additional sheets)

Generic Name	Total Quantity	Type of Container	Number of Containers	(Check One)			Hazard Class
				Sol.	Liq.	Gas	
1. <u>ASBESTOS</u>		<u>LOAD LUGGER</u>	<u>1</u>	<u>XX</u>			
2.							
3.							
4.							
5.							

D. Have appropriate labels been affixed to containers? YES Not required \_\_\_\_\_

E. Have efforts been made to recycle (e.g., excess) waste? NA

F. Has waste been treated in any manner? YES If so, how? DOUBLE BAGGED & WETTED

G. Storage Location: 202A/DOCK #3

H. "I hereby certify that this material has been released by Radiation Monitoring (if applicable) and that Part One of this form has been completed to the best of my knowledge." Survey Card Number: SURVEY DUMPSTER FOR RELEASE ON

DAY OF PICK-UP.

Generator's Signature: *Delonah L. Jackson* Date: 7/24/84

## II. APPROVAL

A. Approved for disposal by Name: \_\_\_\_\_ Phone: \_\_\_\_\_ Address: \_\_\_\_\_ Co.: RHO

Date: \_\_\_\_\_ Signature: \_\_\_\_\_

B. Packaging Requirements (specify): \_\_\_\_\_

C. Disposal Location: \_\_\_\_\_ Chemical Trench, ☒ Asbestos Trench,  
(check one) \_\_\_\_\_ 212-P (Storage), \_\_\_\_\_ Other

## III. TRANSPORTATION/DISPOSAL

A. Transporter(s) Name: H.J. Moseley Phone: 68860 Address: 1171 Company: RHO

B. Date Transported/Disposed: 7-26-84

C. Transporter(s) Signature: *H.J. Moseley*

000434

376 35181

## ASBESTOS DISPOSAL REQUEST

The Industrial Hygiene & Safety Department (IH&S) of Rockwell Hanford Operations has control of asbestos management at Hanford. Accordingly, IH&S has established the following disposal requirements for asbestos at the Central Landfill Asbestos Trench:

1. A radiation release must be obtained for any asbestos emanating from a Radiation Zone.
2. All asbestos material packaged for disposal must be thoroughly wetted to eliminate any airborne asbestos particles during transportation, handling, or burial.
3. All asbestos material must be doubled plastic bagged or wrapped (6 mil or equivalent) to eliminate any airborne asbestos particles. A seal to preclude environmental or personnel exposure should be provided.
4. An accurate estimate of the asbestos volume must be provided along with the following information:

Generator's Name: Jerry M. Bishop

Phone Number: 376-3518

Contractor Contracted By: UNC/Rockwell

Location: 313 Deck Estimated Volume (ft<sup>3</sup>): 238

I have read and accept responsibility for the above outlined requirements for disposal of asbestos material.

Generator Name: Jerry M. Bishop

Date: 7-20-84

The above requirements have been met and the estimated volume appears correct.

Landfill Operator: D E Phelps

Date: 7-20-1984

## ASBESTOS DISPOSAL REQUEST

The Industrial Hygiene & Safety Department (IH&S) of Rockwell Hanford Operations has control of asbestos management at Hanford. Accordingly, IH&S has established the following disposal requirements for asbestos at the Central Landfill Asbestos Trench:

1. A radiation release must be obtained for any asbestos emanating from a Radiation Zone.
2. All asbestos material packaged for disposal must be thoroughly wetted to eliminate any air-borne asbestos particles during transportation, handling, or burial.
3. All asbestos material must be doubled plastic bagged or wrapped (6 mil or equivalent) to eliminate any airborne asbestos particles. A seal to preclude environmental or personnel exposure should be provided.
4. An accurate estimate of the asbestos volume must be provided along with the following information:

Generator's Name: Jerry M. Bishop

Phone Number: 376-3518

Contractor Contracted By: UNC / Rockwell

Location: 313 Dock Estimated Volume (ft<sup>3</sup>): 349 AMB  
~~234~~

I have read and accept responsibility for the above outlined requirements for disposal of asbestos material.

Generator Name: Jerry M. Bishop

Date: 7-20-84

The above requirements have been met and the estimated volume appears correct.

Landfill Operator: D E Phelps

Date: 7-20-1984

## ASBESTOS DISPOSAL REQUEST

The Industrial Hygiene & Safety Department (IH&S) of Rockwell Hanford Operations has control of asbestos management at Hanford. Accordingly, IH&S has established the following disposal requirements for asbestos at the Central Landfill Asbestos Trench:

1. A radiation release must be obtained for any asbestos emanating from a Radiation Zone.
2. All asbestos material packaged for disposal must be thoroughly wetted to eliminate any airborne asbestos particles during transportation, handling, or burial.
3. All asbestos material must be doubled plastic bagged or wrapped (6 mil or equivalent) to eliminate any airborne asbestos particles. A seal to preclude environmental or personnel exposure should be provided.
4. An accurate estimate of the asbestos volume must be provided along with the following information:

Generator's Name: GREGG BROWER

Phone Number: 376-7230

Contractor Contracted By: J.A. JONES

Location: 6652-P BUILDING Estimated Volume (ft<sup>3</sup>): APPROX 64 FT<sup>3</sup>

I have read and accept responsibility for the above outlined requirements for disposal of asbestos material.

Generator Name: Gregg Brower

Date: 7/16/84

The above requirements have been met and the estimated volume appears correct.

Landfill Operator: D E Phelps

Date: 7-17 1984

H. N. Brown  
for G. Cox  
3-2704  
I H & S

## ASBESTOS DISPOSAL REQUEST

The Industrial Hygiene & Safety Department (IH&S) of Rockwell Hanford Operations has control of asbestos management at Hanford. Accordingly, IH&S has established the following disposal requirements for asbestos at the Central Landfill Asbestos Trench:

1. A radiation release must be obtained for any asbestos emanating from a Radiation Zone.
2. All asbestos material packaged for disposal must be thoroughly wetted to eliminate any airborne asbestos particles during transportation, handling, or burial.
3. All asbestos material must be doubled plastic bagged or wrapped (6 mil or equivalent) to eliminate any airborne asbestos particles. A seal to preclude environmental or personnel exposure should be provided.
4. An accurate estimate of the asbestos volume must be provided along with the following information:

Generator's Name: Jerry M. Bishop

Phone Number: 376-3518

Contractor Contracted By: UNC / Rockwell

Location: 313 Dock Estimated Volume (ft<sup>3</sup>): 349

I have read and accept responsibility for the above outlined requirements for disposal of asbestos material.

Generator Name: Jerry M. Bishop

Date: 7-17-84

The above requirements have been met and the estimated volume appears correct.

Landfill Operator: DE Phelps

Date: 7-17-1984

## ASBESTOS DISPOSAL REQUEST

The Industrial Hygiene & Safety Department (IH&S) of Rockwell Hanford Operations has control of asbestos management at Hanford. Accordingly, IH&S has established the following disposal requirements for asbestos at the Central Landfill Asbestos Trench:

1. A radiation release must be obtained for any asbestos emanating from a Radiation Zone.
2. All asbestos material packaged for disposal must be thoroughly wetted to eliminate any airborne asbestos particles during transportation, handling, or burial.
3. All asbestos material must be doubled plastic bagged or wrapped (6 mil or equivalent) to eliminate any airborne asbestos particles. A seal to preclude environmental or personnel exposure should be provided.
4. An accurate estimate of the asbestos volume must be provided along with the following information:

Generator's Name: R. H. GRIFFIN

Phone Number: 3-3-45-40

Contractor Contracted By: Decomm. OPER U. N. C.

Location: 10B-F Estimated Volume (ft<sup>3</sup>): 512

I have read and accept responsibility for the above outlined requirements for disposal of asbestos material.

Generator Name: R. H. Griffin D.O.S. - UNC.

Date: 7/12/84

The above requirements have been met and the estimated volume appears correct.

Landfill Operator: Q. E. Zeller

Date: 7-12-1984

## ASBESTOS DISPOSAL REQUEST

The Industrial Hygiene & Safety Department (IH&S) of Rockwell Hanford Operations has control of asbestos management at Hanford. Accordingly, IH&S has established the following disposal requirements for asbestos at the Central Landfill Asbestos Trench:

1. A radiation release must be obtained for any asbestos emanating from a Radiation Zone.
2. All asbestos material packaged for disposal must be thoroughly wetted to eliminate any airborne asbestos particles during transportation, handling, or burial.
3. All asbestos material must be doubled plastic bagged or wrapped (6 mil or equivalent) to eliminate any airborne asbestos particles. A seal to preclude environmental or personnel exposure should be provided.
4. An accurate estimate of the asbestos volume must be provided along with the following information: *+ calc'd*

Generator's Name: Stan Jones + Edward Davis

Phone Number: 3-2456

Contractor Contracted By: Rockwell

Location: 272-BB Estimated Volume (ft<sup>3</sup>): 200

I have read and accept responsibility for the above outlined requirements for disposal of asbestos material.

Generator Name: G. E. Miller

Date: 29 June 84

The above requirements have been met and the estimated volume appears correct.

Landfill Operator: DE Phelps

Date: 7-5-1984



# REQUEST TO DISPOSE OF NONRADIOACTIVE HAZARDOUS WASTE

**GENERATION:** The Generator should complete Part I and forward this form to:

WS&DT  
202-S/200 West  
Rockwell

9-35

- A. Generator's Name: G. J. Rust Phone: 373 4000 Address: 272 AW Company: RHO
- B. Custodian's Name: H. B. Eddon Phone: 373-2804 Address: 272 AW Company: RHO
- C. Waste Description: (If more than five items, attach additional sheets)

Generic Name	Total Quantity	Type of Container	Number of Containers	(Check One)			Hazard Class
				Sol.	Liq.	Gas	
1. <u>asbestos</u>		<u>loadluggs</u>	<u>2</u>	<input checked="" type="checkbox"/>			
2.							
3.							
4.							
5.							

- D. Have appropriate labels been affixed to containers? yes Not required \_\_\_\_\_
- E. Have efforts been made to recycle (e.g., excess) waste? NA
- F. Has waste been treated in any manner? yes If so, how? double bag with H<sub>2</sub>O add
- G. Storage Location: 272 AW
- H. "I hereby certify that this material has been released by Radiation Monitoring (if applicable) and that Part One of this form has been completed to the best of my knowledge." Survey Card Number: NA

Generator's Signature: G. J. Rust Date: 6-6-84

## II. APPROVAL

- A. Approved for disposal by Name: G.R. Cox Phone: 3-3679 Address: 222-T/200 W. Rockwell  
Date: June 6, 1984 Signature: G.R. Cox
- B. Packaging Requirements (specify): Double bagged and wetted
- C. Disposal Location: \_\_\_\_\_ Chemical Trench, ☒ Asbestos Trench, \_\_\_\_\_  
(check one) \_\_\_\_\_ 212-P (Storage), \_\_\_\_\_ Other \_\_\_\_\_

## III. TRANSPORTATION/DISPOSAL

- A. Transporter(s) Name: H. J. Mosey Phone: 68860 Address: 1171 Company: RHO
- B. Date Transported/Disposed: 6-13-84
- C. Transporter(s) Signature: H. J. Mosey

# REQUEST TO DISPOSE OF NONRADIOACTIVE HAZARDOUS WASTE

I. **GENERATION:** The Generator should complete Part I and forward this form to:

WS&DT  
202-S/200 West  
Rockwell

A. Generator's Name: B.J. Fugate Phone: 373-3114 Address: 271-CR Company: RHO  
 B. Custodian's Name: D.E.D. Phone: 3-3114 Address: 271-C Company: RHO  
 C. Waste Description: (If more than five items, attach additional sheets)

Generic Name	Total Quantity	Type of Container	Number of Containers	(Check One)			Hazard Class
				Sol.	Liq.	Gas	
1. Asbestos	48 cu. ft.	Double wrap bags	30 bag	✓			
2. Asbestos wrapped pipe	96 cu. ft.	Double wrap plastic		✓			
3. Asbestos	100 cu. ft.	boxes and wrapped	15 bx.	✓			
4.							
5.							

D. Have appropriate labels been affixed to containers? Yes Not required \_\_\_\_\_  
 E. Have efforts been made to recycle (e.g., excess) waste? No  
 F. Has waste been treated in any manner? No If so, how? \_\_\_\_\_  
 G. Storage Location: 271-C  
 H. "I hereby certify that this material has been released by Radiation Monitoring (if applicable) and that Part One of this form has been completed to the best of my knowledge." Survey Card Number: #E 8401293

Generator's Signature: Brian Fugate Date: 6-5-84

## II. APPROVAL

A. Approved for disposal by Name: M.L. Rishel Phone: 3-2304 Address: 222T Co.: RHO  
 Date: 6-5-84 Signature: M.L. Rishel  
 B. Packaging Requirements (specify): All double wrapped  
 C. Disposal Location: \_\_\_\_\_ Chemical Trench, ✓ Asbestos Trench, \_\_\_\_\_  
 (check one) \_\_\_\_\_ 212-P (Storage), \_\_\_\_\_ Other \_\_\_\_\_

## III. TRANSPORTATION/DISPOSAL

A. Transporter(s) Name: A.S. Webb Phone: 373 2350 Address: 2707W Company: RHO  
 B. Date Transported/Disposed: June 5, 1984  
 C. Transporter(s) Signature: A.S. Webb  
O.E. Philpot Asbestos Trench - 6-5-1984

000442

# REQUEST TO DISPOSE OF NONRADIOACTIVE HAZARDOUS WASTE

I. GENERATION: The Generator should complete Part I and forward this form to:

WS&DT  
202-S/200 West  
Rockwell

A. Generator's Name: George Adams Phone: 932-4261 Address: Mattawa, WA Company: Adams Martin  
 B. Custodian's Name: \_\_\_\_\_ Phone: \_\_\_\_\_ Address: \_\_\_\_\_ Company: \_\_\_\_\_  
 C. Waste Description: (If more than five items, attach additional sheets)

Generic Name	Total Quantity	Type of Container	Number of Containers	(Check One)			Material Class
				Sol.	Liq.	Gas	
1. <u>Asbestos</u>	<u>30 cu yd. bags</u>	<u>100</u>	<u>100</u>	<u>X</u>			
2. _____							
3. _____							
4. _____							
5. _____							

D. Have appropriate labels been affixed to containers? Y Not required \_\_\_\_\_  
 E. Have efforts been made to recycle (e.g., excess) waste? N/A  
 F. Has waste been treated in any manner? Yes If so, how? \_\_\_\_\_  
 G. Storage Location: 183-B, 100-B  
 H. "I hereby certify that this material has been released by Radiation Monitoring (if applicable) and that Part One of this form has been completed to the best of my knowledge." Survey Card Number: \_\_\_\_\_

Generator's Signature: Geo Adams

Date: 5/29/84

## II. APPROVAL

A. Approved for disposal by Name: W. R. ... Phone: ... Address: ... Co.: ...  
 Date: May 24 1984 Signature: ...  
 B. Packaging Requirements (specify): ...  
 C. Disposal Location: \_\_\_\_\_ Chemical Trench, / Asbestos Trench  
 (check one) \_\_\_\_\_ 212-P (Storage), \_\_\_\_\_ Other

## III. TRANSPORTATION/DISPOSAL

A. Transporter(s) Name: Larry A. Griggar Phone: 932-4261 Address:  Hwy 243 Mattawa Company: Adams Disposal  
 B. Date Transported/Disposed: \_\_\_\_\_  
 C. Transporter(s) Signature: Larry A. Griggar 6-4-1984

000443

8C-6700-174.1 (N-1-82)

# REQUEST TO DISPOSE OF NONRADIOACTIVE HAZARDOUS WASTE

**GENERATION:** The Generator should complete Part I and forward this form to:

WS&DT  
202-S/200 West  
Rockwell

9-21

- A. Generator's Name: J.M. Bishop Phone: 6-3544 Address: 313/300 Area Company: UNC
- B. Custodian's Name: J.M. Bishop Phone: 6-3518 Address: 313/300 Area Company: UNC
- C. Waste Description: (If more than five items, attach additional sheets)

Generic Name	Total Quantity	Type of Container	Number of Containers	(Check One)			Hazard Class
				Sol.	Liq.	Gas	
1. Asbestos Covered Pipes	~ 2000	Double Wrapped Plastic	20	✓			
2. Asbestos Gloves	~ 220 pr	Cardboard Box	17	✓			
3. Asbestos Gloves	~ 280 pr	Double Wrapped Plastic	20	✓			
4. Asbestos Pipe Lines	~ 12 ea	Double Wrapped Plastic	12	✓			
5. Asbestos on Metal Plates	~ 6 ea	Double Wrapped Plastic	6	✓			

- D. Have appropriate labels been affixed to containers? YES Not required \_\_\_\_\_
- E. Have efforts been made to recycle (e.g., excess) waste? NO
- F. Has waste been treated in any manner? NO If so, how? \_\_\_\_\_
- G. Storage Location: 213 Rock Load Lugger
- H. "I hereby certify that this material has been released by Radiation Monitoring (if applicable) and that Part One of this form has been completed to the best of my knowledge." Survey Card Number: 7786

Generator's Signature: Jerry M. Bishop Date: 5-17-84

## II. APPROVAL

- A. Approved for disposal by Name: G.R. Cox Phone: 3-3879 Address: 222-T/200-Wco.: Rockwell  
Date: 5/21/84 Signature: Gary R. Cox
- B. Packaging Requirements (specify): Double wrapped in plastic
- C. Disposal Location: \_\_\_\_\_ Chemical Trench, X Asbestos Trench, \_\_\_\_\_  
(check one) \_\_\_\_\_ 212-P (Storage), \_\_\_\_\_ Other \_\_\_\_\_

## III. TRANSPORTATION/DISPOSAL

- A. Transporter(s) Name: H.J. Mafey Phone: 68860 Address: 1171 Fedg Company: PHO
- B. Date Transported/Disposed: 5/23/84
- C. Transporter(s) Signature: H.J. Mafey

000441

BC-6700-174.1 (N-1-82)

# REQUEST TO DISPOSE OF NONRADIOACTIVE HAZARDOUS WASTE

PLEASE CONTACT SKIP MOONEY 3-3562

**GENERATION:** The Generator should complete Part I and forward this form to:

WS&DT  
202-S/200 West  
Rockwell

9-23

A. Generator's Name: D.L. JACKSON Phone: 3-3622 Address: 202A/3/200E Company: RHO  
B. Custodian's Name: SKIP MOONEY Phone: 3-3562 Address: 202A/1/200E Company: RHO  
C. Waste Description: (If more than five items, attach additional sheets)

Generic Name	Total Quantity	Type of Container	Number of Containers	(Check One)			Hazard Class
				Sol.	Liq.	Gas	
1. <u>ASBESTOS</u>		<u>LOAD LUGGER</u>	<u>1</u>	<u>X</u>			
2.							
3.							
4.							
5.							

D. Have appropriate labels been affixed to containers? YES Not required \_\_\_\_\_  
E. Have efforts been made to recycle (e.g., excess) waste? NA  
F. Has waste been treated in any manner? YES If so, how? DOUBLE BAGGED & WETTED  
G. Storage Location: 202A/DOCK #3  
H. "I hereby certify that this material has been released by Radiation Monitoring (if applicable) and that Part One of this form has been completed to the best of my knowledge." Survey Card Number: SURVEY DUMPSTER FOR RELEASE ON DAY OF PICK-UP.  
Generator's Signature: Deborah L. Jackson Date: 5/16/84

## II. APPROVAL

A. Approved for disposal by Name: G.R. Cox Phone: 3-3679 Address: 222-7200 Wco.: Rockwell  
Date: 5/21/84 Signature: G.R. Cox  
B. Packaging Requirements (specify): Double bagged and wetted  
C. Disposal Location: \_\_\_\_\_ Chemical Trench, X Asbestos Trench, \_\_\_\_\_  
(check one) \_\_\_\_\_ 212-P (Storage), \_\_\_\_\_ Other \_\_\_\_\_

## III. TRANSPORTATION/DISPOSAL

A. Transporter(s) Name: Tw Toberg Phone: 68860 Address: (1171) 1100 Company: RHO  
B. Date Transported/Disposed: 5-25-84  
C. Transporter(s) Signature: Tw Toberg

000445

# REQUEST TO DISPOSE OF NONRADIOACTIVE HAZARDOUS WASTE

I. **GENERATION:** The Generator should complete Part I and forward this form to:

WS&DT  
202-S/200 West  
Rockwell

9-17

A. Generator's Name: J. V. Camp Phone: 3-2457 Address: 224 W 200th Company: RHJ  
 B. Custodian's Name: R. Ekstrom Phone: 3-4303 Address: 222 W 200th Company: RHJ  
 C. Waste Description: (If more than five items, attach additional sheets)

Generic Name	Total Quantity	Type of Container	Number of Containers	(Check One)			Hazard Class
				Sol.	Liq.	Gas	
1. <u>Asbestos</u>	<u>6 yds</u>	<u>bagged</u>	<u>1</u>	<u>1</u>			
2.							
3.							
4.							
5.							

D. Have appropriate labels been affixed to containers? yes Not required \_\_\_\_\_  
 E. Have efforts been made to recycle (e.g., excess) waste? NA  
 F. Has waste been treated in any manner? yes If so, how? wetted and plastic bags  
 G. Storage Location: 224 W 200th  
 H. "I hereby certify that this material has been released by Radiation Monitoring (if applicable) and that Part One of this form has been completed to the best of my knowledge." Survey Card Number: W 84-1321

Generator's Signature: [Signature]

Date: 5-8-84

## II. APPROVAL

A. Approved for disposal by Name: G.R. Cox Phone: 3-3679 Address: 222 Tenth Co.: Rockwell  
 Date: May 14, 1984 Signature: [Signature]  
 B. Packaging Requirements (specify): Double bagged and wetted  
 C. Disposal Location: \_\_\_\_\_ Chemical Trench, X Asbestos Trench, \_\_\_\_\_  
 (check one) \_\_\_\_\_ 212-P (Storage), \_\_\_\_\_ Other \_\_\_\_\_

## III. TRANSPORTATION/DISPOSAL

A. Transporter(s) Name: H. J. Murphy Phone: 614 10 Address: 1171 King Company: RHJ  
 B. Date Transported/Disposed: 5/21/84  
 C. Transporter(s) Signature: [Signature] G.E. Trench  
Asbestos Trench

000466

# REQUEST TO DISPOSE OF NONRADIOACTIVE HAZARDOUS WASTE

**I. GENERATION:** The Generator should complete Part I and forward this form to:

WS&DT  
202-S/200 West  
Rockwell

9-15

A. Generator's Name: L. L. CRASS Phone: 3-3127 Address: 1114 100N Company: UNC  
 B. Custodian's Name: R. H. GRIFFIN Phone: 3-6666 Address: 108F 100F Company: UNC  
 C. Waste Description: (If more than five items, attach additional sheets)

Generic Name	Total Quantity	Type of Container	Number of Containers	(Check One)			Hazard Class
				Sol.	Liq.	Gas	
1. <u>ASBESTOS COVERED</u>		<u>PLASTIC</u>		<u>X</u>			
2. <u>PIPE</u>		<u>DOUBLE WRAPPED</u>					
3.							
4.							
5.							

12 yds

D. Have appropriate labels been affixed to containers? YES Not required \_\_\_\_\_  
 E. Have efforts been made to reduce (e.g. excess) waste? NO  
 F. Has waste been treated in any manner? NO If so, how? \_\_\_\_\_  
 G. Storage Location: 100-F D&D project

H. I hereby certify that this material has been released by Radiation Monitoring (if applicable) and that Part One of this form has been completed to the best of my knowledge. Survey Card Number: \_\_\_\_\_

Generator's Signature: R. L. Crass Date: 5-3-84

## II. APPROVAL

A. Approved for disposal by Name: G. R. Cox Phone: 33679 Address: 222-J/211 W Co. Rockwell  
 Date: May 14, 1984 Signature: G. R. Cox

B. Packaging Requirements (specify): Double Wrapped in Plastic (Note: Open Request for this project)

C. Disposal Location: \_\_\_\_\_ Chemical Trench, X Asbestos Trench, \_\_\_\_\_  
 (check one) \_\_\_\_\_ 212-P (Storage), \_\_\_\_\_ Other \_\_\_\_\_

## III. TRANSPORTATION/DISPOSAL

A. Transporter(s) Name: \_\_\_\_\_ Phone: \_\_\_\_\_ Address: \_\_\_\_\_ Company: \_\_\_\_\_  
 B. Date Transported, Disposed: \_\_\_\_\_  
 C. Transporter(s) Signature: \_\_\_\_\_

000447

# REQUEST TO DISPOSE OF NONRADIOACTIVE HAZARDOUS WASTE

I. **GENERATION:** The Generator should complete Part I and forward this form to:

WS&DT  
202-S/200 West  
Rockwell

9-B

A. Generator's Name: LEE CLARK Phone: 3-2231 Address: 2714 Company: RHO  
 B. Custodian's Name: CLYDE MORAIS Phone: 32385 Address: 2714 Company: RHC  
 C. Waste Description: (If more than five items, attach additional sheets)

Generic Name	Total Quantity	Type of Container	Number of Containers	(Check One)			Hazard Class
				Sol.	Liq.	Gas	
1. <u>Asbestos</u>	<u>230<sup>3</sup></u>	<u>Dumpster</u>	<u>1</u>	<u>X</u>			
2.							
3.							
4.							
5.							

D. Have appropriate labels been affixed to containers? YES Not required \_\_\_\_\_  
 E. Have efforts been made to recycle (e.g., excess) waste? NA  
 F. Has waste been treated in any manner? YES If so, how? PLACED IN Double Plastic Bags  
 G. Storage Location: 2101M  
 H. "I hereby certify that this material has been released by Radiation Monitoring (if applicable) and that Part One of this form has been completed to the best of my knowledge." Survey Card Number: T840741

Generator's Signature: Lee Clark Date: 5-1-84

## II. APPROVAL

A. Approved for disposal by Name: G.R. Cox Phone: 3-3679 Address: 222 T/200 Co. Rockwell  
 Date: May 4, 1984 Signature: G.R. Cox  
 B. Packaging Requirements (specify): Double bagged and wetted  
 C. Disposal Location: \_\_\_\_\_ Chemical Trench, X Asbestos Trench, \_\_\_\_\_  
 (check one) \_\_\_\_\_ 212-P (Storage), \_\_\_\_\_ Other \_\_\_\_\_

## III. TRANSPORTATION/DISPOSAL

A. Transporter(s) Name: H-2. Mackay Phone: 68860 Address: 1171 1st Company: RT10  
 B. Date Transported/Disposed: 5/8 - 84  
 C. Transporter(s) Signature: H-2. Mackay



# REQUEST TO DISPOSE OF NONRADIOACTIVE HAZARDOUS WASTE

I. GENERATION: The Generator should complete Part I and forward this form to:

WS&DT  
202-S/200 West  
Rockwell

A. Generator's Name: MC THOMPSON Phone: 6-1073 Address: 1166/1100 Company: ROCKWELL  
 B. Custodian's Name: MC THOMPSON Phone: 6-1073 Address: 1166/1100 Company: ROCKWELL  
 C. Waste Description: (If more than five items, attach additional sheets)

Generic Name	Total Quantity	Type of Container	Number of Containers	(Check One)			Hazard Class
				Sol.	Liq.	Gas	
1. ASBESTOS GASKET	6 EA	SACK	1	X			FIBERS
2. ASBESTOS PACKING	3 LB	SPOOL	1	X			FIBERS
3. ASBESTOS PACKING	3 LB	BOX	1	X			FIBERS
4.							
5.							

D. Have appropriate labels been affixed to containers? YES Not required \_\_\_\_\_  
 E. Have efforts been made to recycle (e.g., excess) waste? NO  
 F. Has waste been treated in any manner? \_\_\_\_\_ If so, how? \_\_\_\_\_  
 G. Storage Location: 1166 BUILDING, 1100 AREA BAY # 1  
 H. "I hereby certify that this material has been released by Radiation Monitoring (if applicable) and that Part One of this form has been completed to the best of my knowledge." Survey Card Number: \_\_\_\_\_

Generator's Signature: W.W. TAYLOR Date: 4-12-84

## II. APPROVAL

A. Approved for disposal by Name: G.R. Cox Phone: 3-3679 Address: 227/200 W Co.: Rockwell  
 Date: April 16, 1984 Signature: G.R. Cox  
 B. Packaging Requirements (specify): Double bagged and wetted  
 C. Disposal Location: \_\_\_\_\_ Chemical Trench, X Asbestos Trench,  
 (check one) \_\_\_\_\_ 212-P (Storage), \_\_\_\_\_ Other

## III. TRANSPORTATION/DISPOSAL

A. Transporter(s) Name: TW Tobey Phone: 64654 Address: 1171/1100 Company: Rockwell  
 B. Date Transported/Disposed: 4-16-84  
 C. Transporter(s) Signature: Timothy Tobey

# REQUEST TO DISPOSE OF NONRADIOACTIVE HAZARDOUS WASTE

**GENERATION:** The Generator should complete Part I and forward this form to:

WS&DT  
202-S/200 West  
Rockwell

8-33

- A. Generator's Name: D. A. Prichard Phone: 6-0895 Address: 801 1st St. Company: JA Jones Const.  
 B. Custodian's Name: D. A. Prichard Phone: 6-0895 Address: 801 1st St. Company: JA Jones Const.  
 C. Waste Description: (If more than five items, attach additional sheets)

Generic Name	Total Quantity	Type of Container	Number of Containers	(Check One)			Hazard Class
				Sol.	Liq.	Gas	
1. <u>Asbestos</u>	<u>3 Luggers</u>	<u>Plastic</u>		<u>X</u>			<u>ORM-C</u>
2.		<u>Bags</u>					
3.							
4.							
5.							

- D. Have appropriate labels been affixed to containers? Yes Not required \_\_\_\_\_  
 E. Have efforts been made to recycle (e.g., excess) waste? No  
 F. Has waste been treated in any manner? \_\_\_\_\_ If so, how? Double bagged in plastic and wet down.  
 G. Storage Location: Boneyard  
 H. "I hereby certify that this material has been released by Radiation Monitoring (if applicable) and that Part One of this form has been completed to the best of my knowledge." Survey Card Number: X 800344  
 Generator's Signature: D. A. Prichard Date: 4-12-84

## II. APPROVAL

- A. Approved for disposal by Name: G.R. Cox Phone: 3-3679 Address: 222-T/200-H Co. Rockwell  
 Date: April 17, 1984 Signature: Gary R. Cox  
 B. Packaging Requirements (specify): Double bagged and wetted  
 C. Disposal Location: \_\_\_\_\_ Chemical Trench, X Asbestos Trench, \_\_\_\_\_  
 (check one) \_\_\_\_\_ 212-P (Storage), \_\_\_\_\_ Other \_\_\_\_\_

## III. TRANSPORTATION/DISPOSAL

- A. Transporter(s) Name: H.J. Prichard Phone: 3768860 Address: 1171 Company: P.H.C.  
 B. Date Transported/Disposed: 4-29-84 Central Landfill  
 C. Transporter(s) Signature: H.J. Prichard Asbestos Trench

# REQUEST TO DISPOSE OF NONRADIOACTIVE HAZARDOUS WASTE

**GENERATION:** The Generator should complete Part I and forward this form to:

WS&DT  
202-S/200 West  
Rockwell

8-25

- A. Generator's Name: R.D. Silvey Phone: 3-2124 Address: 202-S 200-W Company: RHO
- B. Custodian's Name: RD Silvey Phone: 3-2124 Address: 202-S 200-W Company: RHO
- C. Waste Description: (If more than five items, attach additional sheets)

Generic Name	Total Quantity	Type of Container	Number of Containers	(Check One)			Hazard Class
				Sol.	Liq.	Gas	
1. <u>ASBESTOS</u>	<u>1</u>	<u>HAZARDOUS TRUCK double wrapped in plastic</u>		<input checked="" type="checkbox"/>			<u>ASBESTOS</u>
2.							
3.							
4.							
5.							

- D. Have appropriate labels been affixed to containers? YES Not required \_\_\_\_\_
- E. Have efforts been made to recycle (e.g., excess) waste? N/A
- F. Has waste been treated in any manner? YES If so, how? use of wet methods & wrapped in plastic
- G. Storage Location: 276-C 200-W
- H. "I hereby certify that this material has been released by Radiation Monitoring (if applicable) and that Part One of this form has been completed to the best of my knowledge." Survey Card Number: \_\_\_\_\_

Generator's Signature: Richard D Silvey Date: 4-2-84

## II. APPROVAL

- A. Approved for disposal by Name: G.R. Cox Phone: 3-3679 Address: 222-T/200-W Co.: Rockwell  
Date: 4/5/84 Signature: G.R. Cox
- B. Packaging Requirements (specify): Double wrapped in plastic
- C. Disposal Location: \_\_\_\_\_ Chemical Trench, ☒ Asbestos Trench, \_\_\_\_\_  
(check one) \_\_\_\_\_ 212-P (Storage), \_\_\_\_\_ Other \_\_\_\_\_

## III. TRANSPORTATION/DISPOSAL

- A. Transporter(s) Name: Rich Silvey Phone: 3-2124 Address: 202-S 200-W Company: RHO
- B. Date Transported/Disposed: Asbestos trench Central land fill
- C. Transporter(s) Signature: Richard D Silvey

## HAZARDOUS WASTE MANIFEST

## THIS SHIPPING ORDER

must be legibly filled in, in ink, in indelible pencil, or in Carbon, and retained by the Agent.

MANIFEST DOCUMENT NUMBER

34-001

TO:	FROM:
T/S/D FACILITY Central Landfill	Generator J. A. JONES CONST. SERVICE CO.
E.P.A. ID Code No.	E.P.A. ID Code No. WA7890008967
Address	Address 801 1st. St. Richland, WA 99352
Destination	Origin 300 Area
Phone	Phone 376-0895

No Shipping Units	D.O.T. PROPER SHIPPING NAME	HAZARD CLASS	Haz Mat ID No.	EPA Haz Waste No.	WEIGHT	LABELS REQUIRED (or Exemption No.)
3	Asbestos	ORM-C		U013	2750 LB	YES
	Luggers				Per Lugger	

## PLACARDS REQUIRED

NOTE - Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property. The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding \$ \_\_\_\_\_ Per \_\_\_\_\_

Subject to Section 7 of the conditions, if the shipment is to be delivered to the consignee without recourse on the consignor, the consignor shall sign the following statement:  
The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.  
\_\_\_\_\_  
(Signature of Consignor)

FREIGHT CHARGES  
PREPAID ☐ COLLECT ☐

RECEIVED, subject to the classifications and tariffs in effect on the date of the issue of this Bill of Lading, the property described above in apparent good order, except as noted (contents and condition of contents of packages unknown, marked, consigned, and destined as indicated above which said carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed as to each carrier of all or any of said property over all or any portion of said route to destination and as to each party at any time interested in all or any said property, that every service to be performed hereunder shall be subject to all the bill of lading terms and conditions in the governing classification on the date of shipment. Shipper hereby certifies that he is familiar with all the bill of lading terms and conditions in the governing classification and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

## ALTERNATE DESTINATION (EMERGENCY ONLY)

T/S/D FACILITY \_\_\_\_\_  
E.P.A. ID Code No. \_\_\_\_\_  
Address \_\_\_\_\_  
Destination \_\_\_\_\_

## EMERGENCY RESPONSE INFORMATION

CONTACT Name \_\_\_\_\_  
Phone \_\_\_\_\_  
National Response Center 1-800-424-8802  
in D. C. 426-2675

## CERTIFICATION

This is to certify that the above named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the E.P.A.

Generator Signature James P. Jones Date 4-23-84

TRANSPORTER #1 H. J. Mackey E.P.A. ID No. \_\_\_\_\_  
Address 1171 1st St.  
City Richland, WA State WA Zip 99352 Phone 376-9760

This is to certify acceptance of the hazardous waste shipment.  
Transporter No. 1 Signature H. J. Mackey Date 4-23-84

TRANSPORTER #2 \_\_\_\_\_ E.P.A. ID No. \_\_\_\_\_  
Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Phone \_\_\_\_\_

This is to certify acceptance of the hazardous waste shipment.  
Transporter No. 2 Signature \_\_\_\_\_ Date \_\_\_\_\_

## TREATMENT/STORAGE/DISPOSAL FACILITY

T/S/D FACILITY \_\_\_\_\_ This is to certify acceptance of the hazardous waste for treatment, storage, or disposal.  
Signature [Signature] Date 4-23-1984

TRANSPORTER #1 COPY

000452

# REQUEST TO DISPOSE OF NONRADIOACTIVE HAZARDOUS WASTE

I. GENERATION: The Generator should complete Part I and forward this form to:

WS&DT  
202-S/200 West  
Rockwell

7-9

A. Generator's Name: GREGG BROWER Phone: 376-7230 Address: TRAILER B / 300 Company: J. A. JONES  
 B. Custodian's Name: GORDON SLOTVIG Phone: 946-6188 Address: P.O. Box 759 Company: GEORGE A. CREANT  
 C. Waste Description: (If more than five items, attach additional sheets) RICHLAND, WA.

Generic Name	Total Quantity	Type of Container	Number of Containers	(Check One)		Hazard Class
				Sol. I	Liq. Gas	
1. <u>ASBESTOS</u>	<u>10cy / TRUCK</u>	<u>TRUCK LOAD</u>	<u>TO BE DETERMINED</u>	<input checked="" type="checkbox"/>		<u>ASBESTOS</u>
2.						
3.						
4.						
5.						

D. Have appropriate labels been affixed to containers? N/A Not required \_\_\_\_\_  
 E. Have efforts been made to recycle (e.g., excess) waste? N/A \_\_\_\_\_  
 F. Has waste been treated in any manner? DOUBLE BAGGED so, how? WETTED \_\_\_\_\_  
 G. Storage Location: 384 BUILDING 300 AREA \_\_\_\_\_  
 H. "I hereby certify that this material has been released by Radiation Monitoring (if applicable) and that Part One of this form has been completed to the best of my knowledge." Survey Card Number: N/A \_\_\_\_\_

Generator's Signature: Gregg Brower Date: 2/7/84

## II. APPROVAL

A. Approved for disposal by Name: Grady R. Cox Phone: 3-3679 Address: 222-T/200-Wco.: RHO  
 Date: 2/8/84 Signature: Grady R. Cox  
 B. Packaging Requirements (specify): Double bagged and wetted. Open request for evaluation of work on this project.  
 C. Disposal Location: \_\_\_\_\_ Chemical Trench, ☒ Asbestos Trench, \_\_\_\_\_  
 (check one) \_\_\_\_\_ 212-P (Storage), \_\_\_\_\_ Other \_\_\_\_\_

## III. TRANSPORTATION/DISPOSAL

A. Transporter(s) Name: \_\_\_\_\_ Phone: \_\_\_\_\_ Address: \_\_\_\_\_ Company: \_\_\_\_\_  
 B. Date Transported/Disposed: \_\_\_\_\_  
 C. Transporter(s) Signature: \_\_\_\_\_

000453

BC-6700-174.1 (N-1-82)

JAJ CONTRACTORS  
OTHERS

CENTRAL LANDFILL:

DATE: \_\_\_\_\_

[illegible]

# REQUEST TO DISPOSE OF NONRADIOACTIVE HAZARDOUS WASTE

1. **GENERATION:** The Generator should complete Part I and forward this form to:

WS&DT  
202-S/200 West  
Rockwell

7-9

A. Generator's Name: GREGG BROWER Phone: 376-7280 Address: TRAILER B/300 Company: J. A. JONES  
 B. Custodian's Name: GORDON SLOTVIG Phone: 946-6188 Address: P.O. Box 789 Company: GEORGE A. GRANT  
 C. Waste Description: (If more than five items, attach additional sheets) RIKHLAND, WA.

Generic Name	Total Quantity	Type of Container	Number of Containers	(Check One)			Hazard Class
				Sol.	Liq.	Gas	
1. <u>ASBESTOS</u>	<u>10 CY / TRUCK</u>	<u>TRUCK LOAD</u>	<u>TO BE DETERMINED</u>	<input checked="" type="checkbox"/>			<u>ASBESTOS</u>
2.							
3.							
4.							
5.							

D. Have appropriate labels been affixed to containers? N/A Not required \_\_\_\_\_  
 E. Have efforts been made to recycle (e.g., excess) waste? N/A  
 F. Has waste been treated in any manner? DOUBLE BAGGED so, how? WETTED  
 G. Storage Location: 384 BUILDING 300 AREA  
 H. "I hereby certify that this material has been released by Radiation Monitoring (if applicable) and that Part One of this form has been completed to the best of my knowledge." Survey Card Number: N/A

Generator's Signature: Gregg Brower Date: 2/7/84

## II. APPROVAL

A. Approved for disposal by Name: GARY R. COX Phone: 3-3679 Address: 222-T/200 West Co.: RHO  
 Date: 2/8/84 Signature: GARY R. COX  
 B. Packaging Requirements (specify): Double bagged and wetted. Open request for duration of work on this project.  
 C. Disposal Location: \_\_\_\_\_ Chemical Trench, ☒ Asbestos Trench, \_\_\_\_\_  
 (check one) \_\_\_\_\_ 212-P (Storage), \_\_\_\_\_ Other \_\_\_\_\_

## III. TRANSPORTATION/DISPOSAL

A. Transporter(s) Name: \_\_\_\_\_ Phone: \_\_\_\_\_ Address: \_\_\_\_\_ Company: \_\_\_\_\_  
 B. Date Transported/Disposed: \_\_\_\_\_  
 C. Transporter(s) Signature: \_\_\_\_\_

13.0

REQUEST TO DISPOSE OF NONRADIOACTIVE HAZARDOUS WASTE

No 2003

I. GENERATION: The Generator should complete Part I and forward this form to:

WS&DT  
202-S/200 West  
Rockwell

7-3

- A. Generator's Name: LEE CLARK Phone: 2-2231 Address: 2714 Company: RHO  
B. Custodian's Name: GARY CAMPBELL Phone: 3-1121 Address: 284W Company: RHO  
C. Waste Description: (If more than five items, attach additional sheets)

Generic Name	Total Quantity	Type of Container	Number of Containers	(Check One)			Hazard Class
				Sol.	Liq.	Gas	
1. <u>Asbestos</u>	<u>330<sup>3</sup></u>	<u>Dumpster</u>	<u>1</u>	<u>L</u>			
2.							
3.							
4.							
5.							

- D. Have appropriate labels been affixed to containers? YES Not required \_\_\_\_\_  
E. Have efforts been made to recycle (e.g., excess) waste? NA  
F. Has waste been treated in any manner? YES If so, how? PLACED IN Double Plastic Bags  
G. Storage Location: 284W  
H. "I hereby certify that this material has been released by Radiation Monitoring (if applicable) and that Part One of this form has been completed to the best of my knowledge." Survey Card Number: TS4-0240

Generator's Signature: Lee Clark Date: 1-30-84

II. APPROVAL

- A. Approved for disposal by Name: G.R. Cox Phone: 3-3679 Address: 222-S/200-W Co.: Rockwell  
Date: 2/1/84 Signature: G.R. Cox  
B. Packaging Requirements (specify): Double bagged and wetted.  
C. Disposal Location: \_\_\_\_\_ Chemical Trench, X Asbestos Trench, \_\_\_\_\_  
(check one) \_\_\_\_\_ 212-P (Storage), \_\_\_\_\_ Other \_\_\_\_\_

III. TRANSPORTATION/DISPOSAL

- A. Transporter(s) Name: H.J. Murphy Phone: 66654 Address: 11716 Company: IP1-I-C  
B. Date Transported/Disposed: 2-1-84 Asbestos Trench DE Phelps  
C. Transporter(s) Signature: H.J. Murphy 62729 P.P.O.



# REQUEST TO DISPOSE OF NONRADIOACTIVE HAZARDOUS WASTE

I. **GENERATION:** The Generator should complete Part I and forward this form to:

WS&DT  
202-S/200 West  
Rockwell

7-1

A. Generator's Name: Fred Nunamaker Phone: 6-2638 Address: 300/3707-B Company: WHC  
 B. Custodian's Name: W. W. Biglin Phone: 6-3084 Address: 300/3718 Company: WHC  
 C. Waste Description: (If more than five items, attach additional sheets)

Generic Name	Total Quantity	Type of Container	Number of Containers	(Check One)			Hazard Class
				Sol.	Liq.	Gas	
1. Asbestos	430	Load Lugger	3	X			
2.	CU FT						
3.							
4.							
5.							

D. Have appropriate labels been affixed to containers? yes Not required \_\_\_\_\_  
 E. Have efforts been made to recycle (e.g., excess) waste? no  
 F. Has waste been treated in any manner? no If so, how? \_\_\_\_\_  
 G. Storage Location: Alley, North of 384 Building.

H. "I hereby certify that this material has been released by Radiation Monitoring (if applicable) and that Part One of this form has been completed to the best of my knowledge." Survey Card Number: Survey # 840085 E. Hanford ON. K.

Generator's Signature: [Signature]

Date: January 26, 1984

## II. APPROVAL

A. Approved for disposal by Name: G.R. Cox Phone: 3-3679 Address: 222-Tenth, Rockwell  
 Date: January 26, 1984  
 B. Packaging Requirements (specify): Double bags  
 C. Disposal Location: \_\_\_\_\_ Chemical  
 (check one) \_\_\_\_\_ 212-P (St)

### RADIATION RELEASE

BUILDING Power House DATE 1-27-84

RELEASED BY [Signature]  
RADIATION MONITORING

Hanford Engineering  
Development Laboratory

## III. TRANSPORTATION/DISPOSAL

A. Transporter(s) Name: W. J. Mapey Phone: 66654 Address: 1171 Hwy Company: f.  
 B. Date Transported/Disposed: 127 8 74 DE 92 kg per  
 C. Transporter(s) Signature: [Signature]

000457

BC-6700-174.1 (N-T-82)

9D-7200-051 (1-72)

## HAZARDOUS WASTE MANIFEST

## THIS SHIPPING ORDER

must be legibly filled in, in ink, in indelible pencil, or in  
Carbon, and retained by the Agent.

MANIFEST DOCUMENT NUMBER

--

TO: T/S/D FACILITY RIO		FROM: Generator WESTINGHOUSE HANFORD COMPANY	
E.P.A. ID Code No.		E.P.A. ID Code No.	
Address Central Land Fill		Address P.O. Box 1970 Richland, WA 99352	
Destination Asbestos Trench		Origin 384 Building 300 Area	
Phone 373-3679		Phone 376-2636	

No. Shipping Units	D.O.T. PROPER SHIPPING NAME	HAZARD CLASS	Haz Mat ID No.	EPA Haz Waste No.	WEIGHT	LABELS REQUIRED (or Exemption No.)
3 Load	Asbestos					
Luggers						

PLACARDS REQUIRED Asbestos

NOTE - Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property. The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding \$ \_\_\_\_\_ Per \_\_\_\_\_

Subject to Section 7 of the conditions, if this shipment is to be delivered to the consignee without receipt on the consignee, the carrier shall sign the following statement:  
The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.

FREIGHT CHARGES

PREPAID COLLECT

(Signature of Consignor)

☐ ☐

RECEIVED, subject to the classifications and tariffs in effect on the date of the issue of this Bill of Lading, the property described above in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, consigned, and destined as indicated above which said carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed as to each carrier of all or any of, said property over all or any portion of said route to destination and as to each party at any time interested in all or any said property, that every service to be performed hereunder shall be subject to all the bill of lading terms and conditions in the governing classification on the date of shipment. Shipper hereby certifies that he is familiar with all the bill of lading terms and conditions in the governing classification and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

## ALTERNATE DESTINATION (EMERGENCY ONLY)

## EMERGENCY RESPONSE INFORMATION

T/S/D FACILITY	CONTACT Name
E.P.A. ID Code No.	Phone
Address	National Response Center 1-800-424-8802
Destination	in D. C. 426-2675

## CERTIFICATION

This is to certify that the above named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the E.P.A.

Generator Signature [Signature] Date December 26, 1984

TRANSPORTER #1 [Signature] E.P.A. ID No.    
 Address 1171 1st St. N.E.  
 City Bellevue, WA State WA Zip 98004 Phone 425-6511

This is to certify acceptance of the hazardous waste shipment.

Transporter No. 1 Signature [Signature] Date 1-27-84

TRANSPORTER #2 \_\_\_\_\_ E.P.A. ID No. \_\_\_\_\_  
 Address \_\_\_\_\_  
 City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Phone \_\_\_\_\_

This is to certify acceptance of the hazardous waste shipment.

Transporter No. 2 Signature \_\_\_\_\_ Date \_\_\_\_\_

## TREATMENT/STORAGE/DISPOSAL FACILITY

T/S/D FACILITY This is to certify acceptance of the hazardous waste for treatment, storage, or disposal.  
 Signature [Signature] Date 1-27-84

TRANSPORTER #1 COPY -000455-

13.0

# REQUEST TO DISPOSE OF NONRADIOACTIVE HAZARDOUS WASTE

I. GENERATION: The Generator should complete Part I and forward this form to: WS&DT  
222T-202S/200 West  
Rockwell

A. Generator's Name: C.E. HEATH Phone: 6-9742 Address: 300 AREA Company: JATCS  
 B. Custodian's Name: D.E. MAKI Phone: 6-9752 Address: 400 AREA Company: WHC  
 C. Waste Description: (If more than five items, attach additional sheets)

Generic Name	Total Quantity	Type of Container	Number of Containers	(Check One)			Hazard Class
				Sol.	Liq.	Gas	
1. <u>ASBESTOS ROOF SHAKES</u>	<u>10 CYDS</u>	<u>PLASTIC</u>	<u>1</u>	<input checked="" type="checkbox"/>			<u>ASBESTOS</u>
2.		<u>WRAPPED</u>					
3.		<u>(IN TRUCK BED)</u>					
4.							
5.							

D. Have appropriate labels been affixed to containers? YES Not required \_\_\_\_\_  
 E. Have efforts been made to recycle (e.g., excess) waste? NO - NOT APPLICABLE  
 F. Has waste been treated in any manner? NO If so, how? \_\_\_\_\_  
 G. Storage Location: 400 AREA  
 H. "I hereby certify that this material has been released by Radiation Monitoring (if applicable) and that Part One of this form has been completed to the best of my knowledge." Survey Card Number: NOT APPLICABLE  
 Generator's Signature: C.E. HEATH by G.R. Cox Date: 1/16/84

## II. APPROVAL

A. Approved for disposal by Name: G.R. Cox Phone: 3-3679 Address: 222T/200W Co.: Rockwell  
 Date: January 17, 1984 Signature: G.R. Cox  
 B. Packaging Requirements (specify): Wetted and Double plastic wrap in Dump Truck Bed.  
 C. Disposal Location: \_\_\_\_\_ Chemical Trench, ☒ Asbestos Trench, \_\_\_\_\_  
 (check one) \_\_\_\_\_ 212-P (Storage), \_\_\_\_\_ Other \_\_\_\_\_

## III. TRANSPORTATION/DISPOSAL

A. Transporter(s) Name: Douglas L. Pitts Sr. Phone: 455-5503 Address: 113 N. Nokes Rd Company: YAKIMA VALLEY ROOFING  
 B. Date Transported/Disposed: 1/16/84  
 C. Transporter(s) Signature: [Signature]  
Asbestos Trench 1-18-84 R.E. J. [Signature]





**Battelle**

Pacific Northwest Laboratories

Project Number \_\_\_\_\_

Internal Distribution \_\_\_\_\_

JMH - File/LB

Date August 27, 1984

To Leonard Lust

From Jeene Hobbs *Jeene*

Subject CHEMICAL DISPOSAL

Disposal request approval for #PNL-84-004, 25# of ether, is no longer needed. This chemical plus 6 quarts of tetrahydrofuran and 7 pints of perchloric acid from #PNL-84-007, 1/2 pint of perchloric acid from #PNL-83-020, and 4500 mL of 2-butoxyethanol from #PNL-83-014 were exploded by the Richland Bomb Squad on August 16, 1984. This information is provided to help you update your records.

If you have any questions, please contact me on 376-1361.

/slw

000461

OUTGOING LTR. NO.			
R84-3202			
INCOMING LTR. NO.			
REPLY DUE			
DIST:	LYR.	ENCL.	APPR.
Ash, E.B.			
Bartholomew, D.C.			
BeHofatto, M.			
Carey, J.M.			
Crawford, A.C.	/		
Deichman, J.L.			
Di Pal, C.V.			
Donahue, J.W.			
Gimera, R.J.			
Gruke, R.S.			
Hammend, R.D.			
Heineman, R.E.			
Kinzer, J.E.			
Knight, S.E.			
Larson, M.P.			
P.G.	/		
R.G.			
McDermott, R.J.			
Oglethorpe, L.R.			
Pascoe, K.I.			
Patterson, J.W.	/		
Parkins, J.O.			
Rosen, A.L.			
Roecker, J.H.	/		
Sadino, C.M.			
Wahl, V.R.			
Zahn, L.L.			
Contract Administrator	/		
Central Files			
DR	/		
South	/		
LH	/		
Redmond	/		
LEIT	/		
GA	/		
AD	/		
POOR	/		
OU	/		
Wade	/		
WE	/		
Heine	/		
MA	/		
Hewer	/		
DE	/		
DATE	SEP 12 1984		

Rockwell Hanford Operations  
Energy Systems Group  
P.O. Box 800  
Richland, WA 99352



Rockwell  
International

SEP 12 1984

In reply, refer to letter R84-3202

Mr. C. R. McCarter  
Kaiser Engineering Hanford Company  
Post Office Box 888  
Richland, Washington 99352

Dear Mr. McCarter:

DISPOSAL REQUEST 10-1

Reference: Application to Dispose of Nonradioactive Hazardous Waste,  
C. R. McCarter, June 14, 1984

Rockwell Hanford Operations (Rockwell) has completed review of  
referenced Disposal Request 10-1. The disposal method for these  
wastes is outlined on the attached "Disposal Analysis 10-1."

All packaging, labeling, and marking of the waste reagents shall be  
completed in accordance with the prescribed instructions which are  
based on Department of Transportation (DOT) regulations 49 CFR 171-  
179. A Hazardous Waste Manifest is required to accompany all waste  
shipments in accordance with 40 CFR 263.

Arrangements for transporting waste materials to the 2727-S storage  
facility (for forwarding to offsite disposal) is a generator  
responsibility and may be implemented following compliance with  
Disposal Analysis 10-1 instructions and preparation of the Hazardous  
Waste Manifest.

Inspection of the waste packages will be made by Solid Waste  
Processing & Disposal Unit (SWP&DU) personnel as required to certify  
that the waste is prepared in the manner designated on the subject  
Disposal Analysis. After inspection, SWP&DU personnel will sign the  
Hazardous Waste Manifest. Failure to package in the manner described  
on Disposal Analysis 10-1 will result in suspension of disposal  
privileges for the offending facility.

000162

SEP 12 1984

34-8000-117 (1-8)



Rockwell  
International

Mr. C. R. McCarter

Page 2

SEP 12 1984

Should you require further assistance regarding the disposition of wastes listed on Disposal Analysis 10-1, please contact me on 3-4802.

Very truly yours,

*L. F. Lust*

L. F. Lust -  
Solid Waste Processing & Disposal Unit

LFL:ra

Att.

000463

Disposal Analysis 10-1

Offsite Disposal

Items listed on page 2, in the Offsite Disposal section must be properly packaged and manifested for shipment to an offsite disposal facility in accordance with the State of Washington law (Chapter 173-303). The Hanford generator has the responsibility for packaging and shipping of the waste to the offsite staging facility, 2727-S/200W. Offsite disposal shipments originating from this facility will be arranged by the Rockwell Industrial Hygiene & Safety Unit.

The waste generator must comply with the following requirements for packaging, labeling and marking wastes for offsite disposal:

- o In accordance with 49 CFR 173.24, waste must be packaged in strong, tight, DOT-approved containers, unless otherwise specified in this Disposal Analysis.
- o The DOT hazard class label(s) specified in this Disposal Analysis must be applied to the container. Labels may be obtained from Rockwell Shipping (6-7768).
- o The Shipping Name and the Identification Number, specified in this Disposal Analysis must be marked on the container.

Compliance with these instructions can be accomplished by returning the ammonium hydroxide solution to its original jugs, capping the jugs tightly, returning the jugs to their original fiberboard shipping box, and ensuring that shipping name, number and label are clearly legible on the box.

All hazardous waste must be accompanied by a Hazardous Waste Manifest. The manifest will be initiated by the Rockwell Solid Waste Processing & Disposal Unit (SWP&DU). Both the waste generator and a representative from SWP&DU will sign the "Certification" block on the manifest after labeling, marking and inspection are completed. After the "Transporter" and the "Treatment/Storage/Disposal Facility" blocks have been completed and signed, the manifest will be returned to SWP&D for filing and for distribution of copies.

000464



## DISPOSAL ANALYSIS 10-1

[illegible]

14-00000

**ORIGINAL - RETURN TO GENERATOR**

10-1

DONT SAY IT --- Write It!

DATE Sept. 17, 1984TO C.R. McCarterFROM L.F. Lust lfl  
Solid Waste Processing & Disposal Unit  
(SWP&DU)

Thank you for the copy of the manifest attached to Request No. 10-1, dated June 14, 1984.

It is noted the the manifest destination is "Chemical Trench". It should have gone to 27275/200 West. Your request was not approved by SWP&DU before disposal and the manifest was not signed by the transporter or the disposal unit. In the future, please do not dispose of any Hazardous Waste until you have received a "Disposal Analysis" from SWP&DU and until you have a Uniform Hazardous Waste Manifest signed by SWP&DU.

+ "TO MAKE LIFE LAST, PUT SAFETY FIRST" +

000467

# REQUEST TO DISPOSE OF NONRADIOACTIVE HAZARDOUS WASTE

.. GENERATION: The Generator should complete Part I and forward this form to:

WS&DT  
202-S/200 West  
Rockwell

10-1

A. Generator's Name: C.R. McCARTER Phone: 6-2232 Address: FED/382 Company: KAISER ENGINEERS

B. Custodian's Name: C.R. McCARTER Phone: 6-2232 Address: FED/382 Company: KAISER ENGINEERS

C. Waste Description: (If more than five items, attach additional sheets)

Generic Name	Total Quantity	Type of Container	Number of Containers	(Check One)			Hazard Class
				Sol.	Liq.	Gas	
1. <u>Ammonia</u>	<u>17 gal</u>	<u>Plastic Btl</u>	<u>17</u>		<u>X</u>		<u>Corrosive</u>
2.							
3.							
4.							
5.							

D. Have appropriate labels been affixed to containers? Yes Not required in original boxes; one box made up.

E. Have efforts been made to recycle (e.g., excess) waste? GSA will not handle Ammonia waste

F. Has waste been treated in any manner? Put back in original boxes that they came in from RHO stores.

G. Storage Location: North end of third floor Fed. Bldg., Room 3-17-N

H. "I hereby certify that this material has been released by Radiation Monitoring (if applicable) and that Part One of this form has been completed to the best of my knowledge." Survey Card Number: Not needed in Fed. Bldg.

Generator's Signature: Charles R. McCarter

Date: June 14, 1984

## II. APPROVAL

A. Approved for disposal by Name: L.F. Lust Phone: 3-4802 Address: 2750 E Co.: RHO

Date: 5/28/84

Signature: L.F. Lust

B. Packaging Requirements (specify): See attached DISPOSAL ANALYSIS 10-1

C. Disposal Location: \_\_\_\_\_ Chemical Trench, \_\_\_\_\_ Asbestos Trench,  
(check one) \_\_\_\_\_ 212-P (Storage), X Other 27275

## III. TRANSPORTATION/DISPOSAL

1. Transporter(s) Name: \_\_\_\_\_ Phone: \_\_\_\_\_ Address: \_\_\_\_\_ Company: \_\_\_\_\_

2. Date Transported/Disposed: \_\_\_\_\_

000468

3. Transporter(s) Signature: \_\_\_\_\_

Sent to 27275 approximately June 14, 1984. See attached

# REQUEST TO DISPOSE OF NONRADIOACTIVE HAZARDOUS WASTE

8-17

I. GENERATION: The Generator should complete Part I and forward this form to:

~~WS&DT~~ H.C. Boynton  
292-5/200 West 2750-E/A-104  
~~Rockwell~~ Rockwell

A. Generator's Name: B-Plant/J.D. Briggs Phone: 3-2815 Address: 271-B Company: Rockwell

B. Custodian's Name: J.D. Briggs Phone: 3-2463 Address: 271-B/211-B Company: Rockwell

C. Waste Description: (If more than five items, attach additional sheets)

Generic Name	Total Quantity	Type of Container	Number of Containers	(Check One)			Hazard Class
				Sol.	Liq.	Gas	
1. Lanthanum Nitrate	38	30 gal*	38		X		Oxidizer
2. Trichloroethane	15	55 gal**	15		X		ORM-A
3.							
4.							
5.							

D. Have appropriate labels been affixed to containers? YES Not required \_\_\_\_\_

E. Have efforts been made to recycle (e.g., excess) waste? YES (container not returnable)

F. Has waste been treated in any manner? NO If so, how? \_\_\_\_\_

G. Storage Location: 271-B loading dock

H. "I hereby certify that this material has been released by Radiation Monitoring (if applicable) and that Part One of this form has been completed to the best of my knowledge." Survey Card Number: B 84 03 008(attached)

\* Rubber drums

\*\* Steel drums

Generator's Signature: Donald D. Simon

Date: 3/27/84

## II. APPROVAL

A. Approved for disposal by Name: H.C. Boynton Phone: 3-3516 Address: 2750-E Co.: Rockwell

Date: 6-15-84

Signature: Debra Friele

B. Packaging Requirements (specify): Refer to disposal Request 8-17

C. Disposal Location: X Chemical Trench, \_\_\_\_\_ Asbestos Trench, \_\_\_\_\_  
(check one) 212-P (Storage), \_\_\_\_\_ Other \_\_\_\_\_

## III. TRANSPORTATION/DISPOSAL

A. Transporter(s) Name: TW Tobers Phone: 6-8860 Address: 1171 Bldg Company: RHO

B. Date Transported/Disposed: 6-27-84

C. Transporter(s) Signature: Donna J. Tobers

000469

# Internal Letter



Rockwell International

Date: May 22, 1984

No 65950-84-334

TO: (Name, Organization, Internal Address)  
J. D. Briggs  
271-B/211-B

FROM: (Name, Organization, Internal Address, Phone)  
D. D. Fischer  
Solid Waste Processing &  
Disposal Unit  
3-2491

Subject: APPROVED DISPOSAL REQUEST 8-17

Ref: Application To Dispose of Non-Radioactive Hazardous Waste,  
March 27, 1984, J. D. Briggs

The disposal method for chemical reagents listed in the referenced applications is prescribed on the attached Disposal Request Analysis.

All packaging, labeling and marking of waste reagents shall be completed in accordance with the prescribed instructions which are based on Department of Transportation (DOT) regulations (49 CFR 171-179). A Hazardous Waste Manifest is required to accompany all waste shipments in accordance with 40 CFR 263.

Arrangements for transporting waste materials to the 2727-S storage facility (for forwarding to offsite disposal) and transporting onsite disposal packages directly to the Hanford Non-Radioactive Hazardous Waste Disposal Trench is a generator responsibility and may be implemented upon compliance with the stated disposal request instructions and Hazardous Waste Manifest requirements.

Inspections by Rockwell of package content and integrity will be made as required to certify waste is disposed of in the manner designated in the burial analysis. Failure to package in the manner described in the burial analysis will result in suspension of disposal privileges for the offending facility.

Should you require further assistance regarding the disposition of wastes listed on Disposal Requests 8-17, please contact the following Rockwell personnel:

D. D. Fischer

Solid Waste Processing & Disposal (3-2491)

G. R. Cox

Industrial Hygiene & Safety  
(2727-S Offsite Shipment Coordinator)  
(3-3679)

000170



Rockwell  
International

J. D. Briggs  
May 22, 1984  
Page 2

D. L. McCall

Material  
(6-1651)

A. D. Poor

Transportation  
(6-1452)

*DDFischer*

D. D. Fischer, Engineer  
Solid Waste Processing &  
Disposal Unit

DDF/njb

Att:

cc: C. R. Cox  
D. R. Groth *copy*  
A. D. Poor  
L. H. Rodgers *no*

000471

DISPOSAL ANALYSIS 8-17

ONSITE DISPOSAL - a) Lanthanum nitrate contaminated empty 30-gallon rubber drums (item #1) can be shipped, without triple rinsing, to the Hanford Non-Radioactive Hazardous Waste Disposal Trench.

The following marking and labeling should be present, if it is not already apparent:

- o The DOT hazard class "oxidizer" label must be applied to each container .
  - o Each container must be labeled with the reagent shipping name and the identification number as listed on the Disposal Analysis chart (page 3).
  - o Mark an identification number on each container which correlates and with the Hazardous Waste Manifest.
- b) Trichloroethane contaminated empty 55-gallon drums must be rinsed twice with a suitable solvent and once with water. The waste solvent and water must be properly dispositioned. After triple rinsing the drums they can be shipped to the Hanford Non-Radioactive Hazardous Waste Disposal Trench.

The following marking and labeling should be present if it is not already apparent:

- o Each container must be labeled with the reagent shipping name and identification number as listed on Page 3 of this disposal analysis.
- o Mark an identification number on each container which correlates with the Hazardous Waste Manifest.

Since trichloroethane has been identified as an "Extremely Hazardous Waste", according to Washington State law (Chapter 173-303 WAC), the empty drums cannot be disposed of at the Non-Radioactive Hanford Hazardous Waste Disposal Trench without being tripled rinsed. If the triple rinse process is not compatible with the ongoing operation then these empty drums must be properly labeled and manifested for shipment to an offsite disposal facility.

000472



The Hanford generator has the responsibility for packaging and arranging shipment of ERW to secure its delivery to the chemical offsite staging facility 2727-S/200W. Further offsite EHW shipment originating from 2727-S will be arranged by Rockwell Hanford Operations.

Instruction for packaging, labeling and marking:

- o The proper shipping name Trichloroethane and ID # UN2831 must be marked on each drum.
- o Mark a package identification number which correlates with the manifest information.

000473

HAZARD CLASS	DISPOSAL ITEM NO.	SHIPPING NAME	EPA NO.	ID. NO.	LABEL	NO. OF CONTAINERS	CONTAINER TYPE	QUANTITY Per CONTAINER
Oxidizer	1. <i>new</i>	Nitrate NOS Lanthanum Nitrate	D003	NA1477	Oxidizer	40	Rubber	30 gal.
ORM-A	2.	Trichloro- ethane	U228	UN2831	None	3	Steel	55 gal.

# REQUEST TO DISPOSE OF NONRADIOACTIVE HAZARDOUS WASTE

8-17

**GENERATION:** The Generator should complete Part I and forward this form to:

~~WS&DT~~ H.C. Boynton  
262 S. 200 West 2750-E/A-104  
~~Rockwell~~ Rockwell

A. Generator's Name: B-Plant/J.D. Briggs Phone: 3-2815 Address: 271-B Company: Rockwell

B. Custodian's Name: J.D. Briggs Phone: 3-2463 Address: 271-B/211-B Company: Rockwell

C. Waste Description. (If more than five items, attach additional sheets)

Generic Name	Total Quantity	Type of Container	Number of Containers	(Check One)			Hazard Class
				Sol.	Liq.	Gas	
1. Lanthanum Nitrate	38	30 gal*	38		X		Oxidizer
2. Trichloroethane	15	55 gal**	15		X		ORM-A
3.							
4.							
5.							

D. Have appropriate labels been affixed to containers? YES Not required \_\_\_\_\_

E. Have efforts been made to recycle (e.g., excess) waste? YES (container not returnable)

F. Has waste been treated in any manner? NO If so, how? \_\_\_\_\_

G. Storage Location: 271-B loading dock

H. I hereby certify that this material has been released by Radiation Monitoring (if applicable) and that Part One of this form has been completed to the best of my knowledge. Survey Card Number: B 84 03 008(attached)

\* Rubber drums

\*\* Steel drums

Generator's Signature: [Signature]

Date: 3/27/84

## II. APPROVAL

A. Approved for disposal by Name: H.C. Boynton Phone: 3-3516 Address: 2750-E Co.: Rockwell

Date: 6-15-84

Signature: [Signature]

B. Packaging Requirements (specify): Refer to disposal Request 8-17

C. Disposal Location: X Chemical Trench, \_\_\_\_\_ Asbestos Trench, \_\_\_\_\_  
(check one) \_\_\_\_\_ 212-P (Storage), \_\_\_\_\_ Other \_\_\_\_\_

## III. TRANSPORTATION/DISPOSAL

1. Transporter's Name: \_\_\_\_\_ Phone: \_\_\_\_\_ Address: \_\_\_\_\_ Company: \_\_\_\_\_

d. Date Transported/Disposed: \_\_\_\_\_

C. Transporter's Signature: \_\_\_\_\_

000-175

# REQUEST TO DISPOSE OF NONRADIOACTIVE HAZARDOUS WASTE

8-17

**GENERATION:** The Generator should complete Part I and forward this form to:

WS&DT

H.C. Boynton

202-S/200 West

2750-E/A-104

Rockwell

Rockwell

A. Generator's Name: B-Plant/J. D. Briggs Phone: 3-2815 Address: 271-B Company: Rockwell

B. Custodian's Name: J. D. Briggs Phone: 3-2463 Address: 271-B/211-B Company: Rockwell

C. Waste Description: (If more than five items, attach additional sheets)

Generic Name	Total Quantity	Type of Container	Number of Containers	(Check One)			Hazard Class
				Sol.	Liq.	Gas	
1. Lanthanum Nitrate	40 <sup>***</sup>	30 gal*	40		<input checked="" type="checkbox"/>		Oxidizer
2. Trichloroethane	3 <sup>***</sup>	55 gallon**	3		<input checked="" type="checkbox"/>		ORM-A
3. Fork Truck Battery	1	Battery Case	1		<input checked="" type="checkbox"/>		Corrosive Material
4.							
5.							

D. Have appropriate labels been affixed to containers? YES Not required \_\_\_\_\_

E. Have efforts been made to recycle (e.g., excess) waste? YES (container not returnable)

F. Has waste been treated in any manner? NO If so, how? \_\_\_\_\_

G. Storage Location: 271-B loading dock

H. "I hereby certify that this material has been released by Radiation Monitoring (if applicable) and that Part One of this form has been completed to the best of my knowledge." Survey Card Number: B 84 03 008 (attached)

\* Rubber drums

\*\* Steel drums

\*\*\* Total increases daily due to (Empty Drums)

Generator's Signature: J. D. Briggs Date: 3/27/84

## II. APPROVAL

A. Approved for disposal by Name: H.C. Boynton Phone: 3-3516 Address: 2750 E Co.: Rockwell

Date: 4-30-84 Signature: H.C. Boynton

B. Packaging Requirements (specify): All drums must be triple sealed prior to shipment to the chemical trench. Check with Mr. McCollum 6-706 prior to taking battery to the excess yard.

C. Disposal Location: X (Drums) Chemical Trench, \_\_\_\_\_ Asbestos Trench, \_\_\_\_\_  
(check one) \_\_\_\_\_ 212-P (Storage), excess X Other (Battery)

## III. TRANSPORTATION/DISPOSAL

1. Transporter(s) Name: \_\_\_\_\_ Phone: \_\_\_\_\_ Address: \_\_\_\_\_ Company: \_\_\_\_\_

2. Date Transported/Disposed: \_\_\_\_\_

3. Transporter(s) Signature: \_\_\_\_\_

000476

D		P-Q		12-8		8-4		4-12		BUREAU		CONTROL PROGRAM		DECONT.		FOLLOW-UP		INSP.		LAB		MAINT.		PERSONNEL SURVEY		PROCESS WORK		RAIL MOVEMENT		RELEASE		SAMPLING		ON SITE SHIPMENT		OFF SITE SHIPMENT		VEHICLES SURVEY		CORTAM. CLOTHES		CORTAM. SKIN		HAZAL SM. AND INTRIG.		RADIATION OCCUR.		INJURY		PLANT	
C		TIME		FUNCTIONS		REPORTS																																													
B		SWP		RADIATION SURVEY		SURVEY NUMBER		1384230018																																											
A		RWP NO.		TOTAL TIME		RESPIRATORY PROTECTION WORN		None		Filter		Supplied Air																																							
DAYS		LOCATION		INSTRUMENT(S) USED																																															
31		ROUTINES		2) SAMPLING		12-1		3) PERSONNEL		N-																																									
30		EQUIPMENT		4) BOX OF MASKS		5) LAUNDRY		6) DRUMS		SUPPORTED																																									
29		Item		Dose Rate Measurements		WO		WC		Dist.		Neutron																																							
28		2 SAMPLE		12-1		5RADS																																													
27																																																			
26																																																			
25																																																			
24																																																			
23																																																			
22		Item		Contamination Detection Levels		Smear At Least		Direct		Smears																																									
21		2 DECK STOP		Personnel - Equipment		1000 cm <sup>2</sup>		c/m		d/m		c/m		d/m																																					
20		3 F-N-E						1000		1000		1000		1000																																					
19		4 MASKS						1000		1000		1000		1000																																					
18		5 LAUNDRY						1000		1000		1000		1000																																					
17		6 DRUMS						1000		1000		1000		1000																																					
16		DOSE RATE - WHOLE BODY NORMALIZED TO WHOLE BODY		OR BODY EQUIVALENT		Over		1000		1000		1000		1000																																					
15		DAY		MONTH																																															

More drums of same material will be added  
since our process is on going.

3/27/84

## DISPOSAL ANALYSIS 11-1

### ONSITE DISPOSAL

Instructions for packaging, labeling and marking wastes for onsite disposal:

- Apply the appropriate DOT label, as indicated on page 2 of 2, to the drum.
- Mark the drum with the appropriate ID, as indicated on page 2 of 2.
- Notify Transportation of the appropriate disposal trench for each group of drums:
  - Items 1 & 2 - Chemical Trench (Corrosive)
  - Item 3 - Trash Trench
  - Items 4 & 5 - Construction Trench

## HAZARDOUS WASTE MANIFEST

## THIS SHIPPING ORDER

must be legibly filled in, in ink, in indelible pencil, or in  
Carbon, and retained by the Agent.

MANIFEST DOCUMENT NUMBER

This document refers to  
disposal request  
#PHL-84-001-M

PHL-84-001-M

TO:	FROM:
T/S/D FACILITY Rockwell Hanford Operations	Generator Battelle-PHL
E.P.A. ID Code No. WA-39-000-8967	E.P.A. ID Code No. WA-39-000-8967
Address Richland, WA 99382	Address Richland, WA 99382
Destination Central Landfill - chemical trench	Origin 377 Bldg/300 Area
Phone Harlan Boynton 373-3516	Phone Jeene Hobbs 376-1631

No. Shipping Units	D.O.T. PROPER SHIPPING NAME	HAZARD CLASS	Haz. Mat. ID. No.	EPA Haz Waste No.	WEIGHT	LABELS REQUIRED (or Exemption No.)
1	Waste corrosive liquid, n.o.s. (picrolonic acid, formic acid, & vanadous formate) (the liquid has been absorbed.)	corrosive material	UN1760	0002	250	hazardous waste - corrosive

## PLACARDS REQUIRED none

NOTE - Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property. The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding \$ \_\_\_\_\_ Per \_\_\_\_\_

Shipped in Section 7 of the conditions, of this shipment is to be delivered to the consignee without recourse to the shipper, the consignee shall sign and keep a copy of this bill of lading and shall deliver it to the consignee without payment of freight and any other local charges.

FREIGHT CHARGE  
PREPAID COLLECT ☐ ☐

RECEIVED, subject to the classifications and tariffs in effect on the date of the issue of this Bill of Lading, the property described above in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, consigned, and destined as indicated above which said carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed as to each carrier at all or any of, said property over all or any portion of said route to destination and as to each party at any time interested in all or any said property, that every service to be performed hereunder shall be subject to all the bill of lading terms and conditions in the governing classification on the date of shipment. Shipper hereby certifies that he is familiar with all the bill of lading terms and conditions in the governing classification and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

ALTERNATE DESTINATION (EMERGENCY ONLY)	EMERGENCY RESPONSE INFORMATION
T/S/D FACILITY none	CONTACT Name Jeene Hobbs
E.P.A. ID Code No. _____	Phone 376-1631
Address _____	National Response Center 1-800-424-8802
Destination _____	in D. C. 426-2675

## CERTIFICATION

This is to certify that the above named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the E.P.A.

Generator Signature Jeene Hobbs Date 11 May 84

TRANSPORTER #1 \_\_\_\_\_ E.P.A. ID No. \_\_\_\_\_

Address \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Phone \_\_\_\_\_

Transporter No. 1 Signature \_\_\_\_\_ Date \_\_\_\_\_

TRANSPORTER #2 \_\_\_\_\_ E.P.A. ID No. \_\_\_\_\_

Address \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Phone \_\_\_\_\_

Transporter No. 2 Signature \_\_\_\_\_ Date 5-23-1984

## TREATMENT/STORAGE/DISPOSAL FACILITY

T/S/D FACILITY This is to certify acceptance of the hazardous waste for treatment, storage, or disposal. Signature \_\_\_\_\_ Date 5-23-1984

TRANSPORTER #2 COPY

000479